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ABSTRACT

This final report of the National Day Care Study (NDCS), Volume IV-A, contains three papers that help to set a context for interpreting overall study results. "Research Issues in Day Care, A Focused Review of the Literature" focuses on effects of group care and regulatable characteristics of the day care environment. The second paper, "Case Studies of the National Day Care Study Sites: Atlanta, Detroit and Seattle," reports on the history and current practice of day care in the three NDCS sites. The third paper, "The National Day Care Study from the Perspective of Black Social Scientists: Reflections on Key Research Issues," reviews child development issues relevant to the NDCS from the perspective of black social scientists. Appendices list members of the NDCS consultant panel and present selected correspondence of the Black Task Force, the position statement of the Black Advisory Board members, and a Black Task Force memorandum concerning the NCDS preliminary report and recommendations. (Author/RH)

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Final Report of the National Day Care Study
VOLUME IV-A

October 1980

TECHNICAL APPENDICES TO THE NATIONAL DAY CARE STUDY

BACKGROUND MATERIALS

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OVERVIEW OF NDCS FINAL REPORT VOLUMES

Results of the National Day Care Study and its major supporting study, The National Day Care Supply Study, is presented in a five-volume final report. Contents of these volumes are as follows:

Volume I

Children at the Center: Summary Findings and Policy Implications of the National Day Care Study presents in summary form the major findings and implications for federal day care policy of the National Day Care Study, a four-year study of the effects of regulatable center characteristics on the quality and cost of day care for preschoolers. Volume I serves both as a self-contained volume for the policy makers and as the foundation for the detailed presentation of results in Volumes II, III and IV. (Executive summaries of Supply Study findings and findings of an Infant/Toddler Study are included as appendices to Volume I.)

Volume II

Research Results of the National Day Care Study is a companion volume to *Children at the Center*. Volume II documents the analyses and results of the NDCS for the technical reader who seeks a more thorough understanding of the study from a research perspective. Volume II thus provides the quantitative support for the findings and policy conclusions reported in *Children at the Center*.

Volume III

Day Care Centers in the U.S.: A National Profile 1976–1977, the final report of the National Day Care Supply Study, is based on data gathered from a national random sample of over 3000 day care centers, stratified by state. Summary information is presented on characteristics of children and families served, center programs, staff, finances and regulatory compliance. Discussion of results is augmented by over 150 statistical tables.

Volume IV

Technical Appendices to the National Day Care Study is a compendium of technical papers supporting the most important conclusions of the study. These papers form the basis for the summaries in Volumes I and II. NDCS appendices are bound in three sections as follows.

Volume IV-A, *National Day Care Study Background Materials*, contains three papers, each of which establishes a distinctive context for the NDCS: a literature review focused on effects of group care and regulatable characteristics of the day care environment; case studies of the history and current practice of day care in the three NDCS sites (Atlanta, Detroit, Seattle); and a review of child development issues relevant to the NDCS from the perspective of black social scientists.

Volume IV-B, *National Day Care Study Measurement and Methods*, presents individual reports on a series of technical tasks supporting the principal analyses of the effects of key center characteristics on children. Among the topics covered are: analysis of alternative measures of classroom composition; psychometric analysis of the NDCS test battery; and analyses of several other more peripheral instruments used in the study. Also presented are results of a special survey of parents of subsidized children taken during Phase III, analyses of the impact on children of other center characteristics, such as physical space and program orientation, and econometric analyses.

Volume IV-C, *National Day Care Study Effects Analyses*, also a series of individual technical reports, begins with a presentation of the major effects analyses based on the two behavioral observation instruments, and then moves to a detailed treatment of the development and use of adjusted test score gains. The links among caregiver and child behavior, child test scores and other dependent measures are explored. Also detailed are results of the Atlanta Public School (APS) controlled substudy and APS replication substudy.

Volume V

National Day Care Study Documentation and Data gives a brief overview of NDCS data collection instruments and data files. Part A consists of the instruments themselves, including interview and data collection forms, observation systems and cognitive tests. Part B consists of data dictionaries; these describe every variable in the NDCS analytic data files. Part C provides codebooks for the data files. Parts B and C are available on computer tapes, which are readable independent of specific computer systems. Note that computer tapes are available only from Abt Associates.

Copies of the final report may be ordered from:

- EXECUTIVE SUMMARY (ONLY)
  Day Care Division
  Administration for Children, Youth and Families
  Office of Human Development Services
  Department of Health, Education and Welfare
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  Cambridge, MA 02138

Earlier NDCS publications available from ERIC (hard copy or microfiche) are:

National Day Care Study First Annual Report, Volume I: An Overview of the Study [order number ED 131 928], *Volume II: Phase II Design* [order number ED 131 929], and *Volume III: Information Management and Data Collection Systems* [order number ED 131 930] (Cambridge, MA; Abt Associates, 1976).

National Day Care Study Second Annual Report [order number ED 147 016] (Cambridge, MA; Abt Associates, 1977).

National Day Care Study Preliminary Findings and their Implications [order number ED 152 114] (Cambridge, MA; Abt Associates, 1978).

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Case Studies of the National
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The National Day Care Study from the
Perspective of Black Social Scientists:
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GLOSSARY

This glossary is intended as an aid to the reader. It is not an exhaustive dictionary of terminology relevant to the study or practice of day care, but rather a list of terms used throughout the volume which may be unfamiliar to the reader or which have special meanings for the purposes of the National Day Care Study.

An alphabetical list of terms enables the reader to find any item easily; numbers refer to the location of the term in the glossary itself, which is arranged by subject area to facilitate understanding of terms in relation to each other and in the context of this study. Subject areas are:

Classification of Day Care Services
Children and Staff
Classification of Day Care Centers
NDCS Independent Variables
NDCS Dependent Variables
Statistical Terminology

Alphabetical List of Terms

activity subgroup [42]
aide [17]
auspices [21, 25]
background variable [46]
caregiver [13]
caregiver/child ratio [44]
caregiver qualifications [45]
child outcome [51]
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generalizability of a measure [57]
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group center [23]
group day care home [4]
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independent variable [36]
infant [12]
in-home day care [5]
lead caregiver [16]
lead teacher [15]
legal status [19]
multiple regression [61]

non-FFP center [35]
nonprofit center [24]
number of caregivers [39]
outcome [53]
parent-fee
part-time day care [7]
policy variable [37]
preschooler [10]
principal components analysis [62]
private center [28]
process [50]
profit center [20]
provider [18]
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publicly funded center [32]
regression [60]
reliability [56]
sponsored center [27]
staff [14]
staff/child ratio [43]
staffing pattern [40]
supplemental services [9]
toddler [11]
validity [55]

Classification of Day Care Services

Day Care [1] is defined as care provided to a child by a person or persons outside the child's immediate family, either inside or outside the child's home.

- A day care center [2] is defined as a licensed facility in which care is provided to 13 or more children under the age of 13, generally for up to 12 hours each day, five or more days each week, on a year-round basis.

- The term family day care home [3] refers to a private family home, generally not licensed, in which children receive care, usually for up to 12 hours each day, five or more days each week, on a year-round basis. Most state licensing codes limit family day care homes to a maximum of six children.

- A group day care home [4] is defined as a private home serving 7 to 13 children, with one or two adults.

- In-home day care [5] is defined as care provided to a child in the child's own home by a nonrelative or by a relative who is not a member of the child's immediate family.

Day care of any of these types may be either full-time or part-time.

- Full-time day care [6] is defined as care for 30 or more hours per week.

- Part-time day care [7] is defined as care for less than 30 hours per week.

The services provided by a day care center may be classified into two blocks.

- Care care [8] refers to the common components of the daily experience of all children in day care centers. Core care includes provision of meals, snacks, space and educational/play materials, arrangements for minimum health care, and various caregiver services necessary to the nurturance of young children.

- Supplemental services [9] are those services to children and their families provided by a day care center in addition to core care. For children, such services include transportation, diagnostic testing and referrals. For parents, examples are social, welfare and employment services, and parent involvement in advisory and decisionmaking capacities. Supplemental services often address fundamental needs; the term "supplemental" merely reflects the fact that they are outside the scope of a minimal center day care program.

Children and Staff

The following terms are applied to children and adults in day care settings.

- Preschoolers [10] are defined as children three, four and five years of age (36-71 months). In some states most five-year-olds attend kindergarten and thus are considered school-aged children. In these cases, preschoolers are predominantly 36 through 59 months of age.

- Toddlers [11] are defined as children aged 18 through 35 months of age.

- Infants [12] are defined as children from birth through 17 months of age.

- A caregiver [13] is a person who provides direct care to children in a day care center classroom, a family day care home, or in a child's own home. Unless otherwise specified, the terms caregiver and staff [14] are interchangeable in NDCS documents.

- A lead teacher [15] (or lead caregiver [16]) is the principally responsible caregiver in a day care classroom. The term "teacher" is not intended to connote a school-like atmosphere in the day care center. The term caregiver has been used to refer to persons working with children in day care settings, and the term lead teacher is sometimes used to distinguish the principally responsible caregiver in a day care classroom from her aides.

- An aide [17] is a caregiver who assists a lead teacher in a day care classroom.

- A day care provider [18] is a person who is directly or indirectly involved in the provision of day care services; including caregivers, center directors and owners.

Classification of Day Care Centers

Day care centers are classified according to legal status [19] as profit or nonprofit.

- Profit centers [20] are further classified according to auspices [21] as independent centers or group centers.

  --Independent centers [22] are not part of a chain of day care centers.

  --Group centers [23] belong to a chain (group) of day care centers.

- Nonprofit centers [24] are classified according to auspices [25] as independent centers or sponsored centers.

  --Independent centers [26] are not sponsored by any group or agency.

  --Sponsored centers [27] are classified as either private or public, according to the nature of the sponsoring agency.

    --Private centers [28] are sponsored by a private agency, such as a church. (Note that all profitmaking centers, as well as independent nonprofit centers, are necessarily private.)

    --Public centers [29] are sponsored by some government agency, such as a city school system or a county welfare department.

In addition to classification by legal status and auspices, day care centers may be classified by a cross-cutting typology according to funding source. [30]

- Parent-fee centers [31] derive more than half of their income from parent fees.

- Publicly funded centers [32] derive their funding principally from government subsidies and gifts and contributions.

Alternatively, centers may be classified by funding source [33] according to federal financial participation (FFP). This typology was used in Supply Study analyses, and the reader may find these terms used when Supply Study data are referred to.

- An FFP center [34] is defined as any center which serves one or more federally subsidized child(ren).

- A non-FFP center [35] is defined as a center which serves no federally subsidized children.

NDCS Independent Variables

NDCS independent variables [36] are those variables whose costs and effects were to be measured. There are two types of independent variables: policy variables and background variables.

- Policy variables [37] are those characteristics of day care centers which may influence the quality and cost of center day care and which are or can be affected by federal policy. The NDCS was concerned with two major classes of policy variables: classroom composition and caregiver qualifications:

  --Classroom composition [38] describes configurations of caregivers and children in day care classrooms. Classroom composition is defined by three variables. (Note that any two of these variables mathematically define the third.)

    --Number of caregivers [39] is defined as the total number of caregivers assigned to each classroom. (The term staffing pattern [40] may refer not only to the number of caregivers assigned to a classroom, but also to the mix of teachers and aides or to the mix of qualifications of the caregivers in a classroom.)

    --Group size [41] is defined as the total number of children assigned to a caregiver or team of caregivers. In most cases, groups occupied individual classrooms or well-defined physical spaces within larger rooms. In a few "open classroom" centers, children were free to move from group to group. In such cases, clusters of children participating in common activities under the supervision of the same caregiver or team of caregivers were considered to be "groups." (The term activity subgroup [42], by contrast, refers to the actual number of children interacting with a particular caregiver. A group of 20 children, for instance, might be divided into three activity subgroups, one with the lead teacher, and two with aides.)

--*Staff/child ratio* [43] is defined as *number of caregivers* divided by *group size*. Higher, or more stringent, staff/child ratios are those with a smaller number of children per adult. For instance, a ratio of 1:5 is higher, or more stringent, that a ratio of 1:10 (which is lower, or less stringent). Note that the terms *staff/child ratio* and *caregiver/child ratio* [44] are interchangeable in NDCS discussions.

--*Caregiver qualifications* [45] variables were developed to describe caregivers' years of formal education, amount of training and/or education related to child development, and amount of work experience as a caregiver.

- *Background variables* [46] are characteristics of day care centers which can be influenced by government regulation only indirectly, if at all. Examples are age, sex and race of children, or socio-economic characteristics of families and of the community served by a center.

NDCS Dependent Variables

NDCS *dependent variables* [47] are those features of day care costs and quality measured as indicators of the effects of such center characteristics as group size, staff/child ratio and caregiver qualifications (the study's independent variables).

- In NDCS discussions, the term *effects* [48] is often used to distinguish dependent variables pertaining to quality in day care from dependent variables pertaining to day care costs. There are two major classes of effects variables.

--The term *classroom process* [49] (or *process* [50]) refers to the behavior of children and caregivers in the classroom; that is, the dynamics of their interaction. Process was recorded using two observation instruments, one concentrating on children's behaviors (the Child-Focus Instrument) and one concentrating on caregivers' behaviors (the Adult-Focus Instrument).

--The term child outcomes [51] (or developmental outcomes [52], or outcomes [53]) refers to children's gains in school-readiness skills; although a number of tests and ratings of social and cognitive development were field-tested, ultimately only two, both standardized cognitive tests, proved reliable enough to be used as outcome measures: the Preschool Inventory (PSI) and the Peabody Picture Vocabulary Test (PPVT).

- Cost variables [54] correspond in the main to commonly used terminology in accounting and economics. Where terms or variables peculiar to the NDCS are introduced, they are explained in the text.

Statistical Terminology

- The validity [55] of a measure is the degree to which it measures what it purports to measure. Various features of a measure may be indicative of its validity; such as: (1) a direct conceptual relationship between the measure and the construct of interest (e.g., between an observer's count of the number of children present in a class and the variable group size); or (2) agreement with other measures of the same construct (e.g., agreement between observation-based measurements of group size and schedule-based measurements of group size).

- The reliability [56] of a measure is the degree to which it gives consistent results when applied in a variety of situations; that is, the degree to which it is free of measurement error. Reliability coefficients vary from 0.00 to 1.00. A coefficient of 0.00 indicates a completely unreliable measure; a coefficient of 1.00 indicates a measure that gives perfectly consistent results across all situations. Thus, a reliability coefficient of .95 indicates that 95 percent of the measured variation among the objects of measurement (e.g., among children) is attributable to genuine differences among the objects of measurement, and that only 5 percent of the variation measured is attributable to random effects of errors of measurement.

- The generalizability of a measure [57] is a sophisticated extension of the concept of reliability in psychological measurement theory. It incorporates the notion that the numerous sources of variation in measurement groups as "measurement error" according to standard reliability theory may or may not be defined as "error," depending on one's purpose in using a given measure. [The concept of generalizability is a very complex one which cannot be clearly presented in the limited space available here. For a definitive treatment of the subject, the reader is referred to L. Cronbach, G. Gleser, H. Nanda, and N. Rajaratnam, The Dependability of Behavioral Measurements: Theory of Generalizability for Scores and Profiles (New York: John Wiley & Sons, Inc., 1972).]

- The generalizability of a sample [58] is the degree to which the sample accurately represents a universe to which findings based on the sample are to be extended.

- The correlation [59] (degree of association) between two variables is represented by a correlation coefficient expressed as a decimal fraction. Correlation coefficients range from +1.00 (representing a perfect positive correlation) through zero (representing the absence of any correlation) to -1.00 (representing a perfect negative correlation). For example, a positive correlation between children's scores on Tests A and B would mean that children with high (or low) scores on Tests A also tend to have high (or low) scores on Test B. If the two tests' scores were negatively correlated, then high scores on Test A would tend to be associated with low scores on Test B, and vice versa.

- Regression [60] analysis is a technique for extracting from data an idealized representation, in the form of a straight line, of the relationship between two variables. That is, regression defines the particular straight line which is the "best" linear approximation of the less clearcut pattern exhibited in the data. Similarly, multiple regression [61] analysis extracts an idealized representation of the relationships between a given dependent variable and two or more independent variables.

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- Principal components analysis [62] produced alternative weighted combinations of variables ("principal components"), thus allowing the researcher to select a small number of components which convey most of the important information in a data set--that is, which together account for a large proportion of the variance in the data. For example, a large number of variables related to socioeconomic status might be reduced to a few components--clusters of variables which are highly correlated with one another and only weakly related to variables in other components.

FOREWORD

Providing sound research which supports social policy directions affecting the lives of children and families is unquestionably a major goal of the Administration for Children, Youth and Families. By producing a clear signal in an often times cloudy environment, we are able to fulfill this important responsibility that has been entrusted to us.

The National Day Care Study (NDCS) is an outstanding example of our meeting this responsibility. This study has been widely recognized in both public and private sectors as one of the most important social policy research investigations ever by the Department. Its information has been widely used by many people and organizations, and it already has had a major impact on the drafting of the new HHS Day Care Regulations.

The NDCS searched for day care center characteristics which can both protect children from harm as well as foster their social, emotional and cognitive development. It discovered that these outcomes are clearly attainable when groups of children are small and when caregivers receive training in child-related areas. It also found that relaxing the staff/child ratio would not adversely affect children but could lower costs substantially and thus enable more children to receive care. That these findings held up across diverse sites and with different groups of children, provided support that all children can benefit from a single set of standards.

In all, I feel that the NDCS has more than justified the tremendous energy and time that has gone into it. Through this kind of commitment to excellence in its research programs, the Administration for Children, Youth and Families can be an instrumental force in enhancing the well-being of all children and families.

I am pleased to present the final volumes of the study--Volumes II and IV-A, B and C. Volume II is the research companion to Volume I--"Children at the Center." It provides quantitative support to the study's major findings. Volume IV is a compendium of technical papers which address study-related background issues, NDCS measures and methods and detailed results of individual outcome areas.

Jack Calhoun
Commissioner, Administration
for Children, Youth and Families

October, 1980

PREFACE

The federal government has become a major purchaser of child care, chiefly for the children of the working poor. With the growth of federal expenditures has come increased public concern about the quality and cost of care purchased with federal dollars. The National Day Care Study (NDCS) addressed this dual concern. Commissioned in 1974 by the Office of Child Development,* the study was conducted by two private research organizations--Abt Associates Inc. and SRI International. The study concluded that, by setting appropriate purchasing standards, the government could buy better care at lower cost than it currently buys, thus allowing it to serve more children within existing budgets.

Results of the study were summarized in a report published in March 1979.[1] The results were heavily cited in supporting arguments for proposed federal regulations, which were published in the Federal Register in early 1980.[2]

The present volume is one of a series supplementing the summary report.[3] It is intended to provide professionals in developmental psychology and related fields with a description of the methods and findings underlying the study's conclusions about links between regulatable characteristics of day care centers and the experiences and development of preschool children in center care.

Policy Context of the NDCS

Public concern with the quality of federally subsidized child care is embodied in the Federal Interagency just mentioned), there was little evidence of major heterogeneity that might suggest that the effects of group size are site-specific. Moreover, there was no clear numerical point of demarcation between small, "good" groups and large, "bad" ones. Most of the study's centers maintained groups of three- and four-year olds that varied in size from 12 to 24; typically, desirable behaviors decreased in frequency by roughly 20 percent, and undesirable behaviors increased by 20 percent, as group size increased within this range.

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*The Office of Child Development is now the Administration for Children, Youth and Families (ACYF).

Third, staff/child ratio was also related to some aspects of interaction in the classroom, but the correlates of this critical policy variable, the focus of much of the controversy surrounding day care regulations, were less widespread than those of group size. Ratio was most clearly related to caregiver behavior: lead caregivers in high-ratio classes (those with few children per adult) showed essentially the same pattern of behavior reported above for caregivers in small groups. (However, the confounding of ratio and group size for the lead caregiver sample made it unclear whether the behavior pattern should be attributed to ratio, group size or both.) In addition, lead caregivers in high-ratio classes spent less time in overt management of children than those in low-ratio classes. They also spent more time interacting with other adults and in other activities not directly involving children. Thus some of the "contact time" potentially available to children by virtue of high adult/child ratios was spent in other ways. High ratios were not associated with high frequencies of one-to-one interaction between adults and children; in fact, ratio showed few systematic relationships to the behavior of children at all. Nor was ratio related to children's test score gains, except in a few isolated instances.

Title XX FIDCR. That report, issued in 1978, concluded that federal regulation was an appropriate means of maintaining quality in subsidized care but that the existing FIDCR were in need of revision.[5]

The Office of Child Development (now ACYF) had initiated the NDCS before the controversy over the Title XX FIDCR erupted. The NDCS and the Appropriateness Report were entirely independent efforts. Nevertheless the authors of the Appropriateness Report made heavy use of early results from the study, incorporating a preliminary report of NDCS findings [6] as an appendix to their own report. Subsequently, NDCS staff and the government project director were consulted during the drafting of revised regulations, which began within ACYF and was completed by the Office of HEW's General Counsel. The influence of the study is clearly visible in the proposed new standards regarding caregiver qualifications and group composition (group size and staff/child ratio). While the proposed standards deviate from the specific numerical recommendations regarding ratio and group size that appeared in the NDCS 1979 summary report, basic principles are retained--notably joint regulation of ratio and group size, with increased emphasis on the latter--as are many detailed suggestions regarding methods of monitoring and enforcement.

NDCS Approach and Findings: An Overview

The 1968 FIDCR were based on the advice of practitioners and experts in fields related to child care, as well as the best research evidence available at the time. However, in 1968 there existed only limited empirical evidence to support the basic but tacit assumptions that link various provisions of the regulations to quality of care--for example, the assumption that maintaining high staff/child ratios (few children per caregiver) will increase the quantity and quality of adult-child interaction. Nor were there data to support the assumption that regulatory control over such center characteristics as staff/child ratio, group size and staff qualifications would produce similar outcomes for children across the regions, states, sponsoring agencies and socioeconomic groups affected by federal legislation. Similarly, though a good deal was known about the different components of cost in day care, no specific evidence existed to link costs to regulated center characteristics or to quality. The NDCS attempted to fill these gaps in knowledge by identifying costs and effects associated with variations in center characteristics that were regulated or could potentially be regulated by the federal government.

The study's sponsors and designers recognized that national policymakers have many different views of the goals of day care. For example, federally subsidized day care can be seen primarily as an institution designed to free parents to work or to employ welfare recipients. However, ACYF has long been committed to the view that day care can and should foster the development of children. Hence the study focused on the quality of care from the point of view of the child--i.e., on the nature of the child's experience in day care and on the developmental effects of that experience, as measured by naturalistic observations and standardized tests. While many potentially regulatable center charcteristics were examined, primary attention focused on those characteristics which seemed most central to existing regulations and most likely to affect the daily experience of the child, namely staff/child ratio, group size and staff qualifications.

Perhaps the most general and important finding of the study was that variations in regulatable center characteristics do make a difference in the well-being of children. In contrast to many earlier studies of the effects of variations in curriculum or resource outlay in education, the NDCS showed clearly that it matters how day care classes are arranged and who staffs them. To be sure, much of what goes on in day care is not influenced by regulatable center characteristics. There is a great deal of variability in the quality of human interaction in day care settings even when the composition of the classroom and the qualifications of caregivers are fixed. Nevertheless regulatable characteristics show relationships to meaures of children's experience and of developmental change that are significant both statistically and substantively.

More specifically, for preschool children (ages 3-5), the smaller the group in which children are placed, the more they tend to engage in creative, verbal/intellectual and cooperative activity. Also, children in small groups make more rapid gains on certain standardized tests than do their peers in larger groups. When groups are larger, individual children tend to "get lost," i.e., to wander aimlessly and to be uninvolved in the ongoing activity of the group. These findings hold even when staff/child ratios are relatively high (i.e., when there are few children per caregiver).* Adding adults (usually teachers' aides) to a large group of children improves the adult/child ratio but does not necessarily result in increased engagement on the part of the child, nor improved test score gains. Significantly, children do not appear to experience more one-to-one interaction with adults when ratios are high than when they are low.

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*In day care classrooms, unlike many public school classrooms, it is not usual to find a single adult in charge. Configurations of two or three caregivers, usually a teacher plus aides, are more common. Both the number of children and the number of adults varies significantly from classroom to classroom. It is for this reason that staff/child ratio and group size can vary more or less independently and must be examined separately. It cannot simply be assumed that large classes will have low ratios nor that small classes will have high ratios.

The behavior of caregivers toward children is also related to group or class size, but it is related to the staff/child ratio as well. In small classes and/or classes with high ratios (few children per caregiver), staff tend to devote their attention to small clusters of 2-7 children, rather than to large clusters of 13 or more. Staff in such classes also spend less time observing children passively than do caregivers in large classes and/or classes with low ratios. In addition, the staff/child ratio shows some relationships to caregiver behavior that are not found for group size. High ratios appear to make management of children easier. Also, in high-ratio classes adults spend more time with other adults and in activities not involving children, such as performance of routine chores. This outcome may suggest that high ratios benefit caregivers by providing contact with other adults and time to do necessary tasks, but it also suggests one reason why high ratios do not appear to affect the amount of one-to-one interaction between caregivers and children: in high-ratio classes some of the time potentially available for children is diverted to activities in which children are not directly involved.

On balance, NDCS findings suggest that the importance of group size as a regulatory device for influencing quality in child care may have been underestimated and the importance of staff/child ratio somewhat overestimated. This conclusion, of course, is not an argument for abandoning regulation of staff/child ratio. Not only did ratio show some positive effects, but the range of ratios examined in the NDCS was relatively narrow and relatively high. (Most centers in the study maintained classes with five to nine children per caregiver.) This range was chosen to illustrate effects of variations in ratio between levels required by the FIDCR and levels permitted by most states. Consequently, generalization of the findings to levels outside the range established by current regulatory variations is unwarranted. Moreover, a subsidiary study of center care for children under three suggested that ratio was as important as group size in influencing quality of care for infants and toddlers. Thus, while the findings suggest that controlling ratio alone is not an effective regulatory strategy, they also suggest that ratio should be included with group size in regulations governing classroom composition.

In addition to the above findings on group composition, the NDCS showed that qualifications of caregivers also affect quality of care. While years of formal education, degrees attained and years of experience per se made no discernible difference in quality of care, those caregivers who had education or training specifically related to young children (e.g., in early childhood education, day care, special education or child psychology) provided more social and intellectual stimulation to children in their care than did other caregivers, and the children scored higher on standardized tests.

To arrive at policy recommendations, these findings were integrated with results from other components of the study which were concerned with the costs associated with the various regulatable center characteristics and with prevailing practices in staffing and group composition among centers nationally. The costs of maintaining small groups and of employing staff trained or educated in child-related fields were found to be small, whereas the costs associated with maintaining high staff/child ratios were significant. Consequently it was recommended that, for preschoolers, the group size standards of the existing FIDCR be maintained or made more stringent, while the ratio requirements be relaxed slightly. The expected result would be an improvement in the quality of care for preschoolers together with a reduction in costs relative to those that would prevail if the Title XX FIDCR were enforced. Implementation of the NDCS recommendations would not require major disruption of current practice, since a high proportion of centers nationally already maintain both relatively small groups and staff/child ratios that are only a little less stringent than those mandated by the FIDCR,* despite claims of some providers and state Title XX administrators that the FIDCR ratios are unrealistically strict.[7] For infants and toddlers, institution of a group size standard and maintenance of the current ratio standard were recommended. It was also recommended that training or education in a child-related field be required of all individuals providing direct care to children, and that states be required to make such training available.

Organization of Technical Appendices

Technical Appendices to the National Day Care Study are divided into three volumes. Volume IV-A, Background Materials, contains three papers that help to set a context for overall study results: "Research Issues in Day Care, A Focused Review of the Literature," "Case Studies of the National Day Care Study Sites: Atlanta, Detroit and Seattle," and "The National Day Care Study from the Prospective of Black Social Scientists: Reflections on Key Research Issues." Volume IV-B Measurement and Methods provides seven papers that describe technical tasks undertaken to support the effects analyses reported in Volume IV-C. Included are papers about "Comparing Alternative Measures of Classroom Composition," "A Psychometric Analysis of the National Day Care Study Phase III Child Test Battery,"

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*Staff/child ratios nationwide, averaging over all classes and ages of children, are 1:6.8, compared to 1:6.3 required by the FIDCR, and 1:12.5 permitted by state licensing requirements.[8]

"Investigation of Teacher Rating Scales Considered for Use in the National Day Care Study," "An Analysis of the CDA Checklist Data," "Interviews with Parents," "The Classroom Environment Study," and "The Econometric Model."

Volume IV-C, Effects Analyses, presents the results of analyses that investigated relationships between policy variables, classroom processes and child outcomes. Six papers are included: "The Adult-Focus Observation Effects Analysis," "The Child-Focus Observation Effects Analysis," "Analysis of Test Score Growth in the National Day Care Study," "Classroom Process-Child Outcome Analyses," "The Atlanta Public Schools Day Care Experiment," and "The Effects of Day Care in Eight Atlanta Public Schools Day Care Centers." All of the papers in the Technical Appendices were prepared by study analysts and were the basis for findings presented in Volumes I and II.

PREFACE

1. Ruopp, R., Travers, J., Glantz, F., and Coelen, C. Children at the Center. Final Report of the National Day Care Study: Summary Findings and their Implications. Cambridge, Mass.: Abt Books, 1979.

2. Federal Register, March 19, 1980.

3. Other supporting volumes include Coelen, C., Glantz, F., and Calore, D. Day Care Centers in the U.S.: A National Profile 1976-1977. Cambridge, MA: Abt Books, 1978; and three volumes of Technical Appendices to the National Day Care Study. Cambridge, Mass.: Abt Associates Inc., 1980.

4. Ruopp, et al., op. cit., Appendix A. p. 231.

5. Assistant Secretary for Planning and Evaluation, Department of Health, Education and Welfare. The Appropriateness of the Federal Interagency Day Care Requirements: Report of Findings and Recommendations. Washington, D.C.: U.S. Government Printing Office, 1978.

6. Travers, J., and Ruopp, R. National Day Care Study Preliminary Findings and Their Implications Cambridge, Mass.: Abt Associates Inc., 1978.

7. See Ruopp, et al., op. cit., Chapter 8, 155, and Appendix A, 230-240.

8. Ruopp, et al., op. cit., Appendix A., 236.

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Since the National Day Care Study (NDCS) began in 1974, a great number of people have participated in the effort. These include project staff at Abt Associates Inc., site staff in Atlanta, Detroit and Seattle, and a panel of consultants from across the country, all of whom were ably directed by Dr. Richard Ruopp, Project Director. Staff and consultants at the Administration for Children, Youth and Families, and in particular Mr. Allen Smith, the Government Project Officer, also provided valuable direction for the study. Individual staff and roles are acknowledged in greater detail in Volume I, Children at the Center.

The final task for the NDCS has been the preparation of these volumes of Technical Appendices. The authors of the papers contained herein wrote, rewrote and revised their individual papers to prepare them for publication. In many instances Dr. Lorelei Brush and Dr. Jeffrey Travers gave special technical direction and Sally Weiss provided editorial assistance. Nonetheless, each paper represents an individual effort by each author. No attempt has been made to ensure consistency of style or format or to link the findings of the various papers; this was the purpose of Volume I, Children at the Center and Volume II, Research Results.

Producing all of these papers has required a considerable effort by Karen Hudson, secretary for this final phase of the study, and Christine Bornas, secretary during the earlier phases. They have managed to prepare drafts, organize changes, make corrections and produce the final papers, always within the time schedules provided. To them, and to all of the authors and support staff, I give my warmest thanks.

Nancy Goodrich
Technical Coordinator
Abt Associates Inc.
Cambridge, Mass.
October, 1980

Research Issues in Day Care
A Focused Review of the Literature

Kenneth Livingston
Kenneth Asher

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PREFACE

This paper was commissioned as part of the National Day Care Study (NDCS) to provide readers with a general introduction to major research issues in day care and a more detailed research context on the effects of group care and regulatable characteristics of the day care environment. This literature review includes background information related both to the design considerations and to the major findings of the NDCS, which are reported in other volumes. (See incide front cover.)

Initial work on this paper was done during the summer of 1977. Subsequent review and revision took place from fall 1977 through summer 1978. Although some relevant studies were completed and results published after final work on this review, it is not possible to report these additional sources.

RESEARCH ISSUES IN DAY CARE: A FOCUSED REVIEW OF THE LITERATURE

CHAPTER ONE: INTRODUCTION

The history of the day care movement is long and filled with controversy. Beginning in the early 19th century, infant schools appeared on the national scene at the crest of a growing interest in childhood education as the means to the development of a population of informed, healthy, and, above all, moral adults (Fein and Clarke-Stewart, 1973; Forest, 1927). In the ensuing decades, the emphasis in early childhood education shifted many times--alternately focusing on physical health, acculturation of immigrant families, or intervention on behalf of poor, working mothers and the training of their children to become productive, useful adults. The details of this history, though fascinating, are not of central concern here. What is important is that controversies concerning the value and dangers of day care are not unique to the past decade. Since the opening of the first American day nursery in Boston in 1838, advocates and foes of the movement have energetically argued its merits.

That controversy should surround this or any other approach to the socialization of children should come as no surprise. Adults of all cultures take a special interest in training children to become well-adapted members of society. The uniqueness of the current day care debate stems from the particular constellation of issues around which parents and educators organize their concerns about the future of their children. The intensity of public debate seems to increase in proportion to the continually rising federal investment in day care. In light of this increasing federal involvement, this paper is intended as a review and discussion of those characteristics of day care which are amenable to government regulation. First, however, it is important to consider the context in which regulatory policy is made. The controversies that have characterized the history of early child care are still active today, most often in the form of questions that must be answered before the regulatable day care characteristics can be approached meaningfully. For example, just what are the effects of day care on the child's growth and development? Does day care really enhance social relations, give children a head start in school, disrupt the attachment to the family? Answers to these and related questions are presented below in order to underscore the rationale for and the importance of an examination of those specific components of the day care setting that can be regulated.

CHAPTER TWO: REVIEW OF FINDINGS: IMPACT OF GROUP CARE

Institutionalization and Development

Much of the recent opposition to day care stems from the belief that repeated day-long separation from the mother is unhealthy for the preschool child (Fraiberg, 1977). The evidence most often cited in support of this contention comes from studies of institutionalized infants. In one of the best known studies of this type, Spitz (1945, 1946) found severe developmental disturbance and a high mortality rate among infants raised in a group-care institution, compared with home-reared controls and institutionalized infants whose mothers were with them continuously. Goldfarb (1945), in what is often considered one of the more carefully executed studies of this kind, found intellectual deficits (especially in language) among institutionalized three-year-olds. These deficits were not ameliorated by later placement in foster homes, and persisted into adolescence (Goldfarb, 1945). Freud and Burlington (1944), studying a far more adequate residential nursery than those examined by Spitz and Goldfarb, still found deficits in language development and habit training at two years of age. It is noteworthy that the deficits observed were less extensive and less pervasive than deficits in the more restrictive environments studied by Spitz and Goldfarb.

In these and other studies conducted during the same period, the deficits observed were said to be specifically the result of maternal deprivation. In his 1951 review of the literature on institutionalization, Bowlby set the tone for attitudes about the role of the mother in child development with the following summary statement:

> For the moment it is sufficient to say that what is believed to be essential for mental health is that the infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother substitute) in which both find satisfaction and enjoyment. [p. 11]

The implications of this conclusion for the child in day care were quickly drawn and still constitute the basis for much of the opposition to it (see, e.g., Fraiberg, 1977).

Not all researchers have attributed the negative effects of institutionalization to maternal deprivation, however. Provence and Lipton (1962) still placed the major blame for observed deficits in language, self-image and attachment on lack of mothering, but they also noted the infants' lack of opportunity to make responses of all sorts. Dennis and Najarian (1957) pointed out that infants institutionalized prior to the formation of an attachment are not *de*prived of anything at all, although they may suffer privation of adequate opportunities for learning.

Schaffer's (1958) data showing that hospitalized infants do not overtly protest at separation prior to seven months of age strongly suggest that no deprivation occurs in the early months. After a comprehensive review of the literature on institutionalization, Rutter (1972) questioned the importance of maternal deprivation per se in the production of the "hospitalism" syndrome. He concluded that the deficits observed are the result of inadequate stimulation, which a maternal figure may or may not provide and which can be had in a properly designed institutional environment.

Indeed, Rheingold (1956) has shown that with proper environmental manipulations, the social behavior of institutionalized infants can be successfully enhanced. Wolins (1970) and DuPan and Roth (1955) studied institutionalized children and found no major deficits in development; Wolins' data are particularly interesting because he followed his subjects to adolescence. Dennis and Najarian (1957), in a finding contrary to most of the studies reviewed by Bowlby (1951), discovered that what appeared to be deficits at the end of one year had disappeared by four-and-a-half to six years of age. Tizard et al. (1972) even found superior language development in many of the residential nurseries they studied, and in no case did they find performance to be below average. This finding is especially striking because language is the area of functioning which has most consistently been found deficient. These more successful institutions differed in a number of ways from those which did produce deficits. Perhaps the most salient fact for the proponents of the maternal deprivation hypothesis is that the good institutions attempt to provide care which more closely approximates a traditional family environment, with small, relatively stable groupings of children and caregivers.

Even within families, however, there are wide variations in outcomes. Although Collard (1971) found deficits in exploratory and play behavior of institutionalized infants, there were also social class differences in the home-reared sample. Careful examination of interview and assessment data led to the conclusion that experience with materials and situations similar to those used in testing had a great deal to do with performance. In certain cases the hospitalism syndrome has been found in traditional family environments (Coleman and Provence, 1957), which should caution against simple generalizations about the absolute value of mothering per se.

The foregoing review suggests that there is no simple relationship between institutionalization and psychological deficiency or home rearing and a satisfactory outcome. Perhaps more central to the current review, it also suggests that the equation of institutionalization with day care is based on an unvalidated syllogism, easily found in the literature in more or less subtle form (e.g., Fraiberg, 1977): Institutionalized infants deprived of the experience of a single maternal figure suffer psychological damage as a consequence of this separation, unless an adequate surrogate is provided. Day care infants are separated from their mothers for large portions of their waking hours and are exposed to multiple caregivers. Therefore, day care will produce some degree of psychological damage.

In spite of considerable conflicting evidence from studies of institutionalization itself, it continues to be the basis for most arguments against day care. Mead (1954) decried this confusion of the need for continual care by the mother with the need for stimulation from human beings more than two decades ago, apparently to no avail. Heinicke (1956) directly compared the reactions of 15- to 30-month-olds in day care to those placed in residential nurseries, and found very rapid adjustment to the separation experience in the day care group. In reviews of this and related studies both Yarrow (1964) and Casler (1961) have emphasized the need to distinguish types of separation experiences, both in terms of permanence and duration. The equation of the experiences of infants and children in residential institutions with those of children in day care settings is a leap of faith, even when the quantitative differences between the two are acknowledged.

In summary, generalizations from institutionalized children to those in day care are not warranted by the available evidence or by simple logic. No consistent effect of institutionalization per se has been demonstrated, nor does the presence of the mother automatically guard against retarded development. In addition, it has been argued repeatedly that from the child's perspective the day care environment and that of the residential institution cannot be assumed to be equivalent, even if both are acknowledged to involve some degree of separation. What is needed is a more direct look at the specific effects of the day care environment on child development is presented in the next section.

Impact of Non-Institutional Group Care

Developmental research over the past fifty years has focused on many forms of child care outside the home. On the contemporary scene, a distinction is generally made between care in day care centers and that provided in the homes of (typically) nonprofessional women, many of them with children of their own. Children in both types of settings usually spend all day away from home, most often because their parents are at work. During the 1930's and 1940's in particular, many children attended preschools or nursery schools, usually for only a few hours a day (Swift, 1964). These settings were and are designed with some specific educational focus and not primarily as an alternative to daily care by the mother. The distinction between the nursery school and day care has become blurred in recent years as increasing numbers of day care centers adopt educational programs of their own. However, in the review which follows, the type of setting will be identified when this is relevant.

The general strategy in assessing the effects of group care on the development of the child is to compare children in day care with those reared at home on a set of dependent measures. In the more carefully designed studies, children from two different rearing environments are matched on a number of background variables such as age, sex, birth order, parental socioeconomic status, and so on. There are wide variations in sampling and design sophistication, leading to considerable difficulty in making direct comparisons of results from different studies. Silverstein (1977) and Sjølund (1969) have written excellent discussions of the methodological issues involved in this type of research, and the reader is referred to them for relevant technical details.

In the following pages, the research summarized is organized around the dependent variables examined. Since some studies examined multiple dependent variables they may be referenced more than once. Emphasis has been placed on research done in the late 1960's and 1970's since thorough reviews of earlier work are available (Sjølund, 1969; Swift, 1964). Older works are included primarily when they are especially relevant to the issues under consideration.

Health and Physical and Motor Development

The physical development of the child was of much greater concern to child care workers in the first half of the century, when one of the major tasks of many nursery schools for the poor was to alleviate the effects of extreme poverty. The consensus from research seems to be that group care has no effects on physical growth. Sjølund (1969) reviewed five studies showing no difference between nursery school and home-reared children in this regard, and Gornicki's (1964) study of children in Polish day care centers also found no difference. Although differences favoring nursery school children were noted in some early measurements of general health and physical condition, the evidence suggests that conditions in the home were the more powerful determinant of health habits (Sjølund, 1969). This aspect of the child's development is virtually never studied in modern research on the effects of day care.

The major determinant of susceptibility to and incidence of infectious diseases seems to be the sanitary condition of the center and the care taken to isolate and control contagion, with no difference in rate of infection in homes compared to centers of high quality (Sjølund, 1969). Doyle (1975) recently found higher rates of infection in day care infants compared to home-reared infants for only one of seven categories of infection surveyed (influenza).

The available data also suggest that long-term benefits may accrue to children in preschool group care, who appear to contract fewer diseases upon entering elementary school than children with no previous group care experience. Finally, Golden et al. (1977) compared the quality of nutrition and health care in day care centers and family day care and found that the more centrally and directly administered centers provided better care on these dimensions. There are no data on the actual effects of these differences on the child, but higher quality health care is obviously to be preferred.

Although Sjølund's (1969) review of the effects of group care on motor development is inconclusive, a more careful look at the studies cited suggests that the primary variables operating involve opportunities to practice specific motor skills. This conclusion is consistent with Swift's (1964) review, and is also in accord with the findings of more recent studies. Collard (1971) had found motor retardation among institutionalized infants compared to home-reared controls, an effect which she attributed to differential opportunities for practice. Davis (1960) also reached this conclusion about institutionalized children. A similar interpretation was offered by Vroegh (1977) as an explanation for the finding that the motor development of day care children was superior to that of children in family (home-based) day care. Fowler (1972), however, found no difference between day care and home-reared children on the Bayley test of motor development.

In summary, the literature suggests that group care has no effect upon physical growth and development. Although early group care may protect against high rates of infection during the first years of school, its effects on health generally are a function of the quality of health care provided by the center or family day care home, and must be seen in the light of the health conditions in the home to which the child returns each day. Motor development appears to be enhanced or retarded as a function of group care depending upon the relative opportunities provided by caretakers for the practice of specific motor skills.

Social and Emotional Development

The educators and parents who must teach, live with, and love the children in their care have a special interest in the social and emotional characteristics the child brings to the home and the classroom. It is for this reason that this area more than any other is of special concern to observers of the day care scene. Although all studies in this area have this common focus, the following review is divided into two sections. Studies of attachment are examined separately from those investigating the effects of group care on other aspects of social, emotional and personality development.

Attachment. Since the publication of John Bowlby's comprehensive statement on the growth and maintenance of attachment in infancy and its implications for later interpersonal functioning (Bowlby, 1969), no other single issue has been more controversial among those concerned with day care's impact on children. Yet when Swift (1964) and Sjølund (1969) organized their reviews of the literature, there was no category for research on attachment per se. Current concern that the attachment bond between mother and child will somehow be disrupted by the child's experience in day care marks a sharp reversal of the position, often taken in the early part of the century, that alternative care experiences would promote a healthy detachment from the mother (Forest, 1927).

Direct evidence of the effects of day care on the maternal bond is still relatively scant. Caldwell and her

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associates found no evidence of disturbances in the attachment of 30-month-old children to their mothers or of mothers to their children following involvement in a day care center for periods from six months to two years (Caldwell, 1973; Caldwell, Wright and Tannenbaum, 1970). Data were collected during intensive interviews of mothers and from direct observation of the child's behaviors with both the mother and the caregiver, and were examined in comparison with data from a group of mothers and their home-reared infants.

Blehar (1974) has provided the only direct evidence to date that day care may produce disturbances in the attachment bond analogous to those observed among institutionalized infants. She observed 20 home-reared and 20 day care infants in the Ainsworth "strange situation" (Ainsworth and Wittig, 1969), which involves separation from and reunion with the mother under varying conditions of stress (infant left alone or with a strange adult). Half of the infants in the day care group were two years of age, the other half three years of age at the time of entry into day care, and assessments were made at approximately two-and-one-half and three-and-one-half years, respectively. The home-reared group was composed of children who were matched to infants in day care for age and sex; and all were from intact middle-class families. Sixteen of the day care infants and 12 of the home-reared infants were firstborns; their distribution in the two age groups was not reported.

Blehar observed a significantly greater tendency to avoid the mother among two-and-one-half-year olds, and significantly higher rates of ambivalent behavior, especially at reunion, among the three-and-one-half-year-olds. Many of the differences observed between the two rearing groups were apparent only at three-and-one-half-years of age. Blehar saw the day care infants as much more anxious and insecure in their attachments than the home-reared group. However, it has been suggested (Kagan, 1976) that more of the day care children than home-reared children were first-born. Because first-borns tend to be more insecure in their attachments than later children regardless of their experience in group care (see e.g., Fox, 1977), it is possible that the effects observed were confounded.

Since Blehar's paper appeared, seven additional studies of attachment formation as a function of American day care experiences have been published. None of these studies found the negative effects observed by Blehar. Three of the studies were presented as replications and extensions of Blehar's work. Moskowitz, Schwarz and Corsini (1977), using the Ainsworth strange situation, introduced careful controls for experimenter bias, including the use of videotape and blind scoring. Few effects of rearing condition were found, but those which did occur indicated that the day care infants were less upset during stressful episodes and generally less interested in the stranger. A rearing condition by sex interaction occurred for some measures as the result of the tendency of day care males to function more independently of the mother while she was present than home-reared males. This finding is provocatively congruent with Moore's (1975) finding that males with group care experience in the preschool years were more assertive and independent at age 16 than a control group of males without such experience.

Portnoy and Simmons (1978) also found no differences in attachment patterns in the Ainsworth strange situation as a function of rearing. They did find main effects for sex, independent of rearing condition, suggesting that females were less upset during the session. Roopnarine and Lamb (1978) provided a much needed design improvement by observing behavior in the strange situation one week before entrance into day care and again after three months in day care. A matched group of three-and-one-half to four-year-olds who did not enter day care were assessed at corresponding ages. They found many initial differences in behavior. After three months, however, the only remaining differences favored the day care children, who cried less and sought contact less than their home-reared controls. Evidence has been collected showing that adjustment to day care for children between five and 30 months of age is quite rapid on both social and emotional dimensions (McCutcheon and Calhoun, 1976).

Ragozin (1975) and Brookhart and Hock (1976) questioned the ecological validity of assessments of attachment carried out in the laboratory and examined cross-situational consistency in attachment behaviors. Ragozin (1975) observed attachment behaviors of 17 to 38 month-old infants in the typical strange situation and in the day care center itself during separation and reunion. In the day care setting the infants showed clear evidence of attachment to the mother at reunion and preferred her over other adults present. Brookhart and Hock (1976) examined attachment behaviors of 10- to 17-month-olds with and without group experience in the standard laboratory version of the Ainsworth strange situation and in a version modified for use in the infant's own home. The investigators found no real differences between groups in the home setting, but relatively complex rearing group by sex interactions in the laboratory, especially in relation to the stranger. Behavior toward the mother, however, was highly similar for the two groups.

Context is a variable operating in a much broader way as well, as indicated by the work of Kagan, Kearsley and Zelazo (1975) and Farran and Ramey (1977). The former study found no differences between day care and home-rear groups in attachment behaviors under conditions of mild boredom and stress. They did, however, find some differences associated with the child's ethnicity and socioeconomic background. Farran and Ramey (1977), studying 23 black infants and toddlers in day care, found that the amount of time the child spent near the mother (compared to the caregiver and a stranger) was negatively correlated with exploratory activity. This behavior was also negatively correlated with measures of maternal IQ and involvement with the infant.

Kagan and his collegues (Kagan, et al. 1975; and Kagan, 1976) have stressed the special significance of the mother in the child's life, even when the entire day is spent in the care of others. This appears to be the case even when the infant spends no more than three hours a day in the company of the parents, as is the case in the Israeli kibbutzim (Fox, 1977).

It appears, then, that although the evidence almost entirely favors the conclusion that day care has no adverse effect on attachment behaviors and may even have positive ones, it also suggests that the relationship between the child and his/her primary caregivers is a function of many complex factors operating in the home environment. It is possible, of course, that some of these are quite closely related to factors behind a mother's tendency to place her child in day care, such as her desire to pursue a career (Harrell and Ridley, 1975). Variables such as maternal life-satisfaction, which may be closely related to her career activities, are virtually unstudied (but see Hock, 1978; Winter and Peters, 1974). However, the general finding that quality infant day care has no deleterious effects on attachment, and overall seems to have minor, sometimes positive impact on the child, should serve to quiet the fears of day care's critics and redirect research energies toward a more comprehensive look at the young child's life experiences.

Other Aspects of Social Development. The mother-child bond, as has been indicated, is considered prototypical of all subsequent interpersonal relationships by many theorists (e.g., Freud and Burlington, 1944; Bowlby, 1951, 1969); this is the reason for the great concern over the effects of day care on this attachment. However, long before this issue came to the fore, researchers were exploring the impact of day care and nursery school experiences on other aspects of the child's social development, including in particular their relationships with peers and adults on dimensions such as aggression, dependency and cooperation. Since most of the areas of functioning involve interpersonal relationships, these studies are reviewed along with those whose avowed purpose is the examination of social behavior.

Swift (1964) concluded his review of studies in this area by suggesting that there was no evidence to support the notion that group care experience resulted in poor emotional adjustment, nor did he find reason to believe that the experience enhanced social development. Of the 35 studies done in American nursery schools and day care centers, only three showed negative and three others neutral effects of nursery or day care attendance on socio-emotional development. The remaining studies all showed positive effects of nursery or day care attendance. However, 14 of these studies did not include control groups, making it impossible to distinguish the effects of group care from those of maturation. A careful look at the remaining 15 studies reveals five studies with control groups so poorly matched on variables such as IQ and socioeconomic background that the effects noted could logically have been a function of sample differences (Sherman, 1929; Cushing, 1934; Van Alstyne and Hattwick, 1939; Axtell and Edmunds, 1960). One additional study is virtually impossible to interpret since necessary data for control subjects are not adequately presented (Griffiths, 1939). Thus, although a first glance at Sjølund's review indicates that the weight of the evidence indicates that group care during the preschool years enhances socioemotional development, a closer look suggests that the body of quality data is relatively small but is overwhelmingly positive on the effects of group care.

In the area of personality and emotional adjustment there have been several studies which found no difference between children in group care and those reared at home (Glass, 1949; Caldwell, 1973; Barber, 1975). Others, however, have found children attending nursery school or day care to be less inhibited, less nervous and shy, more independent, self-reliant and self-confident, and more socially aware and curious than home-reared controls (Hattwick, 1936; Walsh, 1931). Kawin and Hoefer (1931) found evidence that some of these traits carried over to the home environment, where children attending nursery school were found to be less dependent and to show greater self-reliance at home than home-reared controls. An additional study found initial positive results of nursery school attendance, but follow-up evaluations over the next year to two years showed that the differences were rapidly disappearing or no longer existed (Jersild and Fite, 1939).

The question of stability of effects is central to both the hopes of day care's supporters and the fears of its detractors. As Kagan and his colleagues have noted (Kagan, 1976; Kagan et al., 1975), much of the research involving day care is carried out on the assumption that there is continuity in development, with early experience playing a disproportionately large role in the structuring of the socially successful or unsuccessful adult. Yet well-controlled, truly longitudinal studies are extremely rare. Moor's (1975) follow-up to adolescence shows that

16-year-old males who had attended nursery school were more assertive and independent of the judgments of adult authority than their non-attending peers. Their female counterparts showed no such effects. Furthermore, as was the case in the attachment literature, variables other than sex of the child (Moore, 1975) such as age of entry into care (Schwarz, Strickland and Krolick, 1974) often show differential effects of rearing condition. When one adds variability in the home backgrounds from which children come and to which they return, the complexity of thoroughly controlled research becomes apparent.

The significance of these background variables in the outcome of day care socialization has been demonstrated recently by Fowler (1972) and Harper and Ault (1976). Fowler compared the socioemotional development of children in day care who came from middle-class backgrounds with those from disadvantaged homes. Initial assessments showed generally positive results for both groups. After 10 to 11 months, however, the pattern of changes was quite different, with the disadvantaged group showing only negative changes and the advantaged group fewer positive shifts. Thus it appears that socioeconomic status is a variable which should be investigated more frequently, a conclusion strengthened by the results of Kagan et al. (1975).

Harper and Ault (1976) have taken a somewhat more sociological look at the effects of day care on socialization. They conducted extensive interviews with a large sample of families of four- to five-year-olds using day care and with a group rearing their four- to five-year-old children at home. Day care improved both social adjustment and self-concept and also decreased parental identification. Furthermore, they found that these changes occurred without affecting family interaction. The results also suggest that the movement away from personality ratings and toward behavior measures as dependent variables is a sound one.

It has often been assumed that one of the major impacts of the day care experience on the child is increased contact with peers (see e.g., Bronfenbrenner, 1970). Yet Doyle (1975) found that day care infants five to 30 months of age initiated fewer interactions, both positive and negative, with peers than did home-reared controls. Two other research teams (Schwarz et al., 1974; Finkelstein and Wilson, 1977) found no differences in peer relations.

Most researchers, however, have found at least some positive effects on peer interaction as a function of day care experiences. Kagan et al. (1975) found no differences in day care and home-reared infants at 20 or 29 months of age in solo play with a peer. However, when the infants were taken at 29 months to a novel day care setting with many strange peers, the day care infants engaged in significantly more interaction and played more in general than their home-reared counterparts. Schwarz, Krolick and Strickland (1973) discovered comparable differences between rearing groups on the first day and after five weeks in a new day care center. Macrae and Herbert-Jackson (1976), in an attempt to replicate an earlier finding of no difference between rearing groups in peer interaction, _did_ find higher ratings for day care than home-reared infants on ability to get along with peers. They cautioned against global generalization from small centers to day care in general.

Raph and his colleagues (Raph, et al., 1968) found some evidence of a decrease in the number of negative interactions with peers which was at least partly associated with length of nursery school attendance. Controls were not good, however, rendering the results tentative.

On balance the evidence suggests it is likely that group care has positive effects on young children's relations with their peers, although characteristics of the day care center and the sample have some bearing on the precise nature of the outcome. This trend seems to hold across different types of measurement, but since no true multiple method studies are available this conclusion cannot be stated definitively.

Children are, of course, not the only people present in the day care center, and results of research concerning changes related to day care in the child's behavior toward adults are most provocative. Three of the studies cited previously are relevant to this issue. Raph, et al. (1968), who had found a decrease in negative interactions with peers, found an increase in negative interactions with adults as a function of time in day care. Moore (1964) found that day care attenders were less inclined to social conformity than home-reared peers, and Schwarz, et al. (1974) found that day care infants were less cooperative with adults than their home-reared counterparts.

Additional studies include those of Vroegh (1977), who found that children in home or family day care were rated more compliant and likeable than those in center care, and Allen and Masling (1957), who found that among the 15 social development variables they assessed, home-reared children scored higher than nursery school peers only on respect for adults. Golden et al. (1977) found that children in family day care received more individual attention from adults than did children in center-based programs, and that this variable correlated significantly with how well children related to adults at three years of age. Finally, Cornelius and Denny (1975) found no sex differences in adult dependency among day care children, but found home-reared girls more dependent than their male counterparts. The authors stress the less traditional nature of sex-role orientations in day care centers and within families whose children attend such centers as a possible explanation for this difference.

As in socialization research generally, studies of socioemotional development in group care situations are haunted by conceptual vagueness and methodological complexity. There is no convincing evidence that well-designed day care disturbs personality development, and it may well enhance the ability to relate to peers. On the other hand, day care children seem to develop attitudes toward adults, especially as authority figures, which are less submissive than those of children reared at home. The complement of this development is often increased assertiveness and self-reliance and a less traditional sex-role orientation. It should be noted that harmony among the concerned adults is most likely to result when parents and alternative caregivers are in accord about both the means and desired ends of socialization, but this is difficult to achieve even within ideologically coherent settings such as the Israeli kibbutz (Fox, 1977).

With respect to issues such as the child's perception of himself in relation to adults, this congruence may be prohibited by the structural differences between home and day care settings. Cochran (1977) has documented the greater salience of adults in the home as compared to the group care situation. The latter setting is designed around children, whereas the former is a multiple function environment in which the child constitutes only one of several considerations for the adults in the setting. In this sense, family day care may constitute a rearing environment more nearly like that of the child's own home (Cochran, 1977; Golden et al., 1977). Whether this is desirable, however, is a question which can have only a subjective answer. As Vroegh (1977) has noted, home-reared children are used as controls in most studies of group care on the assumption that the outcomes of preschool socialization by a single caregiver are normal and desirable. It is clear from the foregoing review that these outcomes can be modified by alternative child care arrangements. However, there is some inconsistency in the nature of outcomes, and studies of day care as a global variable provide little or no information about the mechanisms and processes in the group care environment that mediate these effects when they do occur. Following a brief review of research on cognitive functioning as affected by day care, an examination is made of the few studies that have attempted to elucidate the effects of the specific components of the day care setting on the child.

Cognitive Development

The study of the effects of group care on intellectual development has a long history. The nursery school movement of the 1920's and 1930's generated a number of studies designed to assess the ability of the nursery school to accelerate cognitive development. Most of those studies focused on general measures of intelligence such as the Stanford-Binet or the Merrill-Palmer test. These studies and subsequent efforts will be reviewed only briefly here.

In 1940 the National Society for Studies in Education published its 39th annual yearbook. Its topic for that year was the growth of intellectual functioning during childhood, and 10 of the articles included focused specifically on the outcome of nursery school programs around the country. Eight of those studies (Anderson; Bird; Frandsen and Barlow; Goodenough and Maurer; Jones and Jorgensen; Lamson; Voas; Olson and Hughes, all 1940)) showed no effect of nursery school attendance on intelligence test scores, while two did report significant positive changes in test scores as a result of nursery school attendance (Starkweather and Roberts; Wellman, both 1940). However, these two reports of positive outcomes included no control groups, but based their conclusions on test-retest results for the same group of subjects. The failure to provide adequate controls was common in early studies of cognitive growth in the nursery school, and the experiments of the 1930's ended on an inconclusive note. It should be pointed out that there were no reports during this period of negative effects as a result of the group care experience.

Sjølund's (1969) review of the subsequent literature on this subject uncovered relatively few studies on the question prior to the 1960's, at which time the focus of this research effort shifted toward a concern with intervention on behalf of culturally deprived children. What research was available contributed to the hopeful atmosphere surrounding this movement. Results of research with children from average or above average socioeconomic backgrounds were mixed, with about equal numbers of studies showing no effect and positive effects. The handful of studies with children from disadvantaged backgrounds, however, suggested that these children were most likely to benefit from preschool group care experiences (Olson and Hughes, 1940; Barrett and Koch, 1930). As will be seen in upcoming paragraphs, this conclusion cannot be stated with such simplicity following more recent and thorough examinations of the disadvantaged population.

Studies of the impact of group care on cognitive development are no longer as simplistic as they once were. The dependent variables are often specific language and conceptual skills rather than, or at least in addition to, general measures of intelligence. Gornicki's (1964) finding that day care in Poland seemed to retard speech development relative to home rearing seemed consistent to many with the finding from research in residential institutions that language was often the most negatively affected system in the developing child (see the review of these studies in an earlier section of this paper). However, high quality day care centers have been shown to produce no negative effects (e.g., Kagan et al., 1975) on measures of vocabulary or concept formation. Fowler (1972) showed significant increases on subscales of Bayley's test of mental abilities, including Imitation and Comprehension and measures of vocalization and vocabulary. Schwarz et al. (1974) found no effect of day care on teacher ratings of intellectual functioning, while Macrae and Herbert-Jackson's (1976) replication showed positive effects on ratings of problem-solving ability, ability to abstract, and planfulness. Doyle (1975) found higher IQ scores in day care infants five to 30 months of age than in home reared controls, but since no pre-day care assessment was made it is possible that this represented a difference in samples. Golden et al. (1977) found that the only psychological measure which differentiated children in family and home care from children in center-based care was performance on the Stanford-Binet test, with center-based children performing better at 36 months. Since there were no differences in sensory motor intelligence at 18 months and no observed differences in the amount of cognitive/language stimulation children in the different settings received, the authors were at a loss to account for this finding. Clearly there must have been some difference in the nature of stimulation received, if not in quantity, but it was not possible to definitely isolate the relevant factors.

Finally, Robinson and Robinson (1974) found significantly greater increases in scores on the Bayley test of mental abilities among children who entered a special, high stimulation type of day care in infancy than among home-reared controls. Home-reared controls in this study were selected with unusual care and followed in parallel with matched day care peers. Those children admitted at age two also showed greater increases in cognitive scores, as measured by both the Stanford-Binet and the Peabody Picture

Vocabulary Test, than did home-reared controls. These increases were most dramatic among the black children and infants in the sample, who were also the most disadvantaged socioeconomically. This finding seems to support the conclusion that children from poor backgrounds are most likely to benefit from the day care experience.

The optimism generated by findings of positive effects on cognitive development reached a crescendo in the early to mid-1960's; and the Head Start program was the hastily conceived child of this hopeful spirit (see Gotts, 1973, for a concise history of the program). Early evaluations of the program were limited in both scope and methodology; in 1969, independent contractors were hired to take a comprehensive look at the long-term impact of the program (Westinghouse Learning Corporation-Ohio University, 1969). The results of this study, clouded by methodological difficulties, suggested that the effects of Head Start did not last into the elmentary school years.

Federal funding of day care as an intervention strategy has continued, of course, but many lessons were learned from the Head Start experience and the current shape of things is not what it was. The literature on intervention is vast and increasing, and little more than a cursory examination of that body of work is appropriate here. What follows is an abstraction of major trends in intervention research.

Abelson's (1974) long-term follow-up of a subsample from the early Head Start program introduced an important qualification to the original finding that cognitive gains made in Head Start centers did not persist into the school years (Westinghouse, 1969). Abelson showed that gains in IQ and other cognitive measures were maintained in some instances, and that the controlling variable appeared to be the nature and quality of the primary school program to which the Head Start child was exposed. Many investigations into the fade-out phenomenon, which seems to afflict almost all intervention efforts, have revealed that intervention into the lives of disadvantaged children is an exceedingly complex matter. Follow-through into later school years is only one element of that complexity.

Bissell (1973) has performed an enlightening re-analysis of several of these studies. She identified four types of programs based on their objectives, strategies for obtaining those objectives and degree of structure: traditional permissive-enrichment programs; structured, cognitively oriented programs with an emphasis on language development; structured programs with an intent to teach children specific information; and programs (such as Montessori programs) with highly structured environments. The programs were evaluated in light of child outcomes--changes in IQ scores, psycholinguistic abilities and school readiness. Results suggested that the most effective programs were those with specific objectives and definite strategies for achieving them, especially when staff were well trained in the techniques employed. Interaction effects suggested that for disadvantaged children a great deal of structure and focus were especially important to produce reliable effects. She notes that these were precisely the characteristics which were missing in some hastily designed Head Start centers. There were also specific and measurable effects of variables such as staff/child ratio.

Bronfenbrenner (1974) has written what is perhaps the most insightful and informative review of the literature on intervention attempts. The reader interested in an excellent technical discussion of the problems inherent in evaluation research is referred to this document. For our present purposes, however, it is most important to note that a number of component variables in the day care setting must be examined if the outcome for children in those settings is to be properly understood. Degree and duration of parent involvement and characteristics of the home to which the child returns are crucial, as they have been found to be for other dimensions of the child's development. Characteristics of the day care setting, especially as they affect interaction between the child and teachers, are also important.

This review of the impact of day care as a setting for the socialization of the child has uncovered no evidence that quality group care has deleterious effects on the child. In fact, day care appears to have the potential for positive effects under the proper circumstances. The problem is to determine just what those circumstances are, especially along those dimensions which can be regulated. It is now time to consider the available research on precisely this question. To anticipate what is by now a cliched conclusion, it will be found that there are still more questions than answers in this field, and further research of the sort represented by the National Day Care Study is sorely needed. Nevertheless, there are some intriguing suggestions in the available literature.

CHAPTER THREE: REGULATABLE COMPONENTS OF THE DAY CARE SETTING

Despite the great interest manifested in young children's development and behavior in various group environments, relatively little research has been devoted to the role of quantitative, directly manageable dimensions which describe such environments. These include the number and developmental levels of children present, number and types of adults present, the amount and arrangement of space, and the availability of different resources. "Manageable" here means not only manipulatable, but also able to be regulated to meet widely agreed-upon criteria (see discussion below of Fiene, 1977). Much work to date has been based on tradition, intuition, and personal and organizational experience.

Some of the most persuasive empirically based support for changing or retaining existing practices has consisted of concept and review papers, policy statements, and professional reflections by individuals with substantial background in designing and managing young children's programs. Thus, much of our current knowledge of the effects of the previously mentioned "manageable variables" comes from associating commonly observed levels of these variables in various programs with different patterns of children's behavior and other outcome variables. It is a rare study that has ensured beforehand a reasonable range of variation in the manageable variables and then measured effects on children's behavior, development, and other indicators of program outcomes.

In this review, day care programs are discussed in terms of their component features and processes. The most lengthy consideration is given to those components which are most easily manipulated, such as group size, staff/child ratio and physical dimensions of the setting. These variables can be directly --although not always simply--quantified, and they are thus more easily monitored than variables such as program philosophy or personal characteristics of staff. Because staff behavior and program structure can be analyzed as dependent variables with respect to group size, adult/child ratio and physical features of the environment, they are not entirely inaccessible to policymakers. However, since access is for all practical purposes mediated and not direct, these features of the day care setting will be considered first and in less detail than those which are more manageable.

Program and Curriculum

Much of what needs to be said about the differential impact of variations in day care programs has already been hinted at in previous sections. First, there are many attempts in the literature to define a set of dimensions along which day care programs can be compared. Bissell's (1973) categorization of programs on the basis of the degree of structure built into them has already been discussed. Fein and Clarke-Stewart (1973) suggested six dimensions along which programs could be classified: implicit conception of the child; goals set for the child; aspect of development emphasized (e.g., language, socioemotional development); target of the educational effort (child, family, or both); degree of structure and program techniques; and amount of adult-child contact built into the program. It will be noted that there are some commonalities in the dimensions defined by both Bissell and by Fein and Clarke-Stewart. The factor-analytic approach of Prescott et al. (1975) to this problem isolated four dimensions of difference among the 50 centers they observed: degree of freedom or restraint in response to the child's efforts at self-expression; degree to which the teacher took an active role in guiding the child's activities; extent to which the program focused on activities for the whole group as opposed to ones tailored to individual children in the classroom; and the extent to which more superficial interactions were direct or indirect.

Of course, the first questions which must be asked are whether differences in programs are translated into differences in dependent--primarily behavioral--variables in the day care center, and whether these outcomes can be systematically related to program characteristics.

One answer is provided by Reichenberg-Hackett's (1964) research. She found greater creativity in the drawings of children in nursery classrooms rated as most encouraging than in classes with more authoritarian climates. Bissell (1973) found that programs with a philosophy geared toward fostering cognitive growth and with specific, teacher-directed strategies for achieving that goal were more effective for the disadvantaged child than non-directive programs. However, low-structure programs were found to be more effective for less disadvantaged children. Karnes, Teska and Hodgins (1970) investigated the relative effectiveness of four different programs in enhancing language and intellectual development of four-year-olds. An experimental program with highly structured, directed activities was most successful, followed by a program with a more traditional approach (emphasis on play and a low degree of structure). The third most successful program involved integrating children with relative cognitive deficits into classrooms with children performing at a higher level, hoping to capitalize on the tendency of young children to model their peers. The least successful of the four programs was the Montessori program.

Cox (1968), unlike Karnes and his colleagues, found that experience in a Montessori classroom enhanced social responsiveness, associative vocabulary and cognitive growth generally, relative to the experience of a traditional classroom. This difference, as noted by Karnes, Teska and Hodgins themselves, may be a function of the fact that the children in Karnes' Montessori classroom were older than is typically the case upon entry into the program, and the duration of their stay was briefer than is generally considered necessary for positive effects from the Montessori approach.

This admittedly cursory examination of the literature is sufficient to point out that even when focusing on program dimensions such as degree of structure, which seems to be considered important by almost all researchers in the area, there is no simple pattern of effects. Depending on the nature of the dependent variables assessed and the particular sample of children studied, high degrees of structure may have either a positive or a negative effect. Furthermore, studies directly relating programs to outcomes for the child are rare, so that in most instances it is not even possible to isolate the particular features of the structured program which were responsible for the effects noted. Degree of organization is itself a complex characteristic. Once again, it is necessary to look even more microscopically at the make-up of the day care setting. Since program philosophy is, in any case, difficult to regulate (and it is not clear that it would be desirable to do so even if it were possible), a more concrete focus is called for. It is the opinion of many that characteristics of the staff in day care centers is the most important single variable determining the nature and quality of the program (Reichenberg-Hackett, 1962; Swift, 1964).

Staff Characteristics

A look at the major reviews of the day care literature reveals that many of the criteria for good day care workers are derived from studies of elementary school teachers and of socialization in the home (see especially Swift, 1964; Fein and Clarke-Stewart, 1973). The amount of information, albeit of an indirect nature, is thus enormous. Much of the evidence upon which conventional wisdom about the qualifications of the day care worker is based is tangential, which is perhaps responsible for the considerable variability in state standards for day care staff (McCormick, 1977). McCormick found that across all 50 states, the criteria for staff most frequently considered very important involved the health, both mental and physical, of the prospective day care worker. Educational background was ranked second, followed by a set of variables so diverse that they could not be lableled, again demonstrating the heterogeneity of standards. Personality and ability were the criteria ranked least often as most important. McCormick noted the considerable difficulty involved in measuring personality dimensions reliably, to say nothing of the extremely subjective nature of dimensions such as "good character," "understanding," and "emotional maturity," which were the personality traits most often mentioned as important. It is perhaps to the credit of state regulatory agencies that the criteria most often ranked are those which are also most easily assessed and monitored.

Those who study day care teachers generally focus on teacher attitudes and beliefs, teacher behaviors, and/or training and experience. Unfortunately, specific variables such as these are seldom related to outcomes in the classroom. Swift (1964), for example, summarized research available at the time by noting that although techniques which are organized around the goals and interests of the child and

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which are specific and appropriate to the child's developmental level were most likely to promote learning, the specific teacher characteristics which result in such strategies were not clearly understood.

In one of the most recent examples of this type of research, Rubin and Hansen (1976) both assessed beliefs about curriculum practices and observed related categories of behavior among 14 teachers from seven different day care programs (two teachers from each program). They were able to examine degree of consistency in attitudes and behaviors both within and across settings, and found that although there was considerable consistency within settings in both attitudes and behaviors, the behavioral ratings were more consistent than attitudes. Furthermore, both attitudes and behaviors were more consistent among teachers in Montessori programs than among those in more traditional settings, suggesting that explicit program philosophies may be reliably communicated. Correlations between the attitudes and behaviors of teachers from different program backgrounds were, however, generally quite low and only rarely significant. They suggest that the fact of intra-staff consistency in attitudes and behaviors may be an important variable mediating program effectiveness, but it is also clear that there is considerable variation in these measurable characteristics from setting to setting. The practical significance of these results is unknown, however, since no classroom outcome variables were assessed.

Rodriquiz (1978) has presented preliminary findings using an instrument for the evalution of family day care mothers reliable relationships between objectively observed behaviors and subjective ratings of caregiver effectiveness, but again there are no validating measures of behavior for the children in the setting.

There is a small body of research focusing on the relationship between characteristics of the teacher, as indicated by his/her behaviors, and effects on the child, most of which has been reviewed by Swift (1964), Sjølund (1969), and Fein and Clarke-Stewart (1973). Much of this research has been referred to in other connections in earlier sections of this paper, and confirms the general impression that the crucial factors are sensitivity to the child's developmental level and capacities and a gentle, warm manner, even (or perhaps especially) when the goal is to punish undesirable behaviors. One of the most frequently cited studies in this area is that of Thompson (1944). In Thompson's (1944) study, the same teacher was instructed to run two classrooms of matched children in very different ways. In one class the teacher was impersonal and uninvolved, while in the other the teacher was responsive to the extent of the child's needs. Measures of ascendance, social participation, leadership, and constructiveness all indicated more positive outcomes in the second group, while the teacher's behavior had no effect on number of nervous habits or intellectual growth. A recent study (Golden et al., 1977) comparing family day care and center-based care reports no differences in quality of interactions, but considerably greater frequency of interaction in the family care setting. This behavioral difference, however, bore no relation to psychological outcomes among the children in those settings.

Although there is evidence to the effect that what the day care teacher does and how he or she does it may affect the child, the available information is not particularly useful at the policy level. Results of relatively short-term training programs for day care workers seem to be encouraging (Fein and Clarke-Stewart, 1973) in that nonprofessionals can be trained to behave in ways which are consistent with the stated goals and strategies of specific programs.

Thus, it is possible to teach specific behavioral techniques and a general understanding of children to produce measurable improvements in classroom outcomes, then there is some reason to include at least this one staff background variable in policy recommendations.

Three cautionary remarks are in order here, however. First, the accuracy and completeness of data from basic research on the developmental process are crucial to this endeavor. This calls for greater efforts on the part of both practitioners and basic researchers to establish lines of communication for their findings and theories (see Williams, 1977, for an effort at integration).

Second, it would be a mistake to make policy decisions too hastily, given the dearth of evidence on the inevitable interaction between the background of the caregiver and the backgrounds of the children entrusted to her. Horowitz and Paden (1973) have called attention to the difficulties inherent in providing day care for minority group members in the context of the mainstream culture. Many parents of minority children wish to preserve the identity of the subculture, but it is desirable for the children and society alike that they be successful members of the larger culture as well. To accomplish both ends is a complex and difficult task. Gonzolez (1975) has suggested, for example, that one should look for special competencies in those who would work with preschool Chicano children, and has attempted to specify the relevant criteria. However, until clear goals are specified and controlled research is conducted to determine the utility of those criteria, one cannot use them with impunity.

One final word of caution introduces the remainder of this review. Even if the criteria for the ideal caregiver could be clearly specified, measured, and monitored over time, the environment within which that caregiver must function cannot be ignored. The size of the group with which he or she must work, the number of other caregivers present, and the features of the physical environment all affect the quality of the experience for all persons present. As suggested earlier, many of these factors are more accessible to policy review and regulation are staff characteristics, and as will be seen, can also be powerfully affect the behavior of both adults and children in the setting. The remainder of this paper is devoted to a review of the literature concerned with such variables.

Staff/Child Ratio, Group Size and Other Environmental Variables

Many of the variables to be discussed in this section are remarkably simple on the surface, and one would think it relatively easy to predict the effects of variation in such factors as the size of a day care group or the ratio of staff to children. But one could easily be wrong. However simple it may seem at first glance, the day care environment is quite complex, largely because it is so dynamic. The number of staff and of children often varies from day to day, sometimes from hour to hour, and these variables have different values across day care centers. Furthermore, they vary in conjunction with size and partitioning of available space and resources. Simple linear predictions about increases or decreases in any one of these variables, even assuming the others held constant, can be made ony by also making several assumptions. In many cases predictions can be made only by resorting to vague reference and very general statements. It is for these reasons that we have decided to treat these issues as strictly empirical questions, depending upon the insight of those conducting the research reviewed here for properly formulated hypotheses.

Stimulation from the Social Environment: Definitions and Methods of Investigation

The research literature concerned with environment variables unfortunately contains many gaps, simply because not all relevant questions have been asked. There are real problems, moreover, with research issues that have been addressed many times in different ways--with confusing results. Much of this confusion is due simply to the inconsistent use of a plethora of terms to refer to a few constructs. Thus, reseachers face two problems at the outset. The day care environment is quite complex, and it has not yet been possible to explore all aspects of that complexity. A second problem concerns the proliferation of terms that are often inconsistently used.

Just such confusion has surrounded investigations of three major environmental variables--group size, staff/child ratio, and teacher professionalism. These dimensions of early childhood programs are manageable or "policy" variables, susceptible to regulatory intervention and hold great promise of being related to environmental and developmental quality. There are at least two or three distinct definitions of each of these policy variables, and no extensive and consistent research literature that would allow confident choice amonmg definitions. Group size, for example, may validly refer to the number of children assigned to a day care classroom, the number of adults assigned to a group at a certain staff/child ratio, or the density of children and adults in a given space. Similarly, staff/child ratio takes on different specific meanings if "children" refers to children permanently enrolled, to those in the room during an observation or to the results of some specific method of counting children. For example, Fiene (1977) has developed an algorithm for computing teacher/child ratio equivalents. Day care providers are asked questions such as arrival times of the first and last caregivers and children, departure time of the first child, the number of caregivers, and the maximum number of children enrolled in a group in order to compute "relative weighted contact hours." This number is then compared to a table of contact hours representing levels prescribed by government standards. Defining "staff" entails deciding among all staff available in a program, all those in the classroom throughout the day, only those present during the observation, or some other representation, possibly assigning various weights to different levels of staff.

The development of constructs from the research literature is an exercise in eclectic extrapolation. Group size and, to a great extent, staff/child ratio are approached most closely by investigations of crowding and density of individuals in a given area. Ratio can also be discussed in terms of the degree of structure and control in a classroom, which includes aspects of teacher behavior. Both of these concerns (crowding/density, structure/control) can be conceived as problems in environmental stimulation, its sources, dimensions, optimum levels for certain outcomes and implications over relatively long periods of time (Wohlwill, 1966).

Most research efforts have been devoted to the effects of crowding and density. Although, at first, crowding appears to be synonymous with high density (many individuals/unit area), various writers argue that a more complex distinction would be helpful (Stokols, 1972; Rapoport, 1975; Loo, 1973). The gist of their reasoning is that density should describe objective numbers of individuals present in a given space, or at most be proportional to the amount of socially originated stimulation available (Rapoport, 1975). Crowding refers to the phenomenal state associated with high levels of socially related stimulation. Although high density is generally the basic cause of the sensation of crowding, it is quite possible to create highly stimulating situations with relatively few people present, and conversely to diminish the intensity of stimulation in high density settings. It is along this path from density to the phenomenal affective state that the organization of the stimulating environment operates. Density's effects are mediated by such agents as the architectural design and features of the setting, activities of the participants, their needs states and prior experiences, and amount and form of organization (such as that provided by an adult over a group of children).

Crowding, then, can be seen as one of a range of possible psychological effects of variations in density and other environmental dimensions. Crowding of course is a rather unpleasant sensation, and possibly harmful if experienced over extended periods. High density situations might, however, be experienced as pleasant under certain conditions: a group may feel solidarity or security, for example. In an early childhood setting variations in density might be associated with feelings of comfort or distress, frustration or satisfaction, attentiveness or distraction, interest or apathy, amiability or hostility, concern for others or selfishness, and many other alternative states for which students of child development have devised means of observation and assessment.

Density can be manipulated by varying the number of individuals present or the amount of space available. Social density has come to mean the operational variable of adding or removing people; spatial density is the operational variable brought into play by reducing or increasing area. Judging from qualitatively different effects in several experiments with children and adults in which spatial and social density can be compared, the two methods do not seem to be fully equivalent (Hutt and Vaizey, 1966; McGrew, 1970; Loo, 1972, 1976; Loo and Smetana, 1977; Loo and Kennelly, 1977; Nogami, 1972; Asher and Erickson, 1977; Ginsburg and Pollman, 1975). It is not yet clear whether this is due to procedural variability and error or whether the social/spatial density difference is psychologically valid. Ideally, manipulation of spatial density permits isolation of available space as a variable (intensity of social stimulation from constant number of individual sources, optional objects of attention, privacy), and manipulation of social density permits isolation of group size (number of nonidentical sources of stimulation).

Particular methods used to study density and crowding have become confounded with the different populations of interest. Animals have generally been studied for their biological and long-term behavioral responses to especially crowded conditions. Adults have been studied chiefly on their task performance and verbal response to questions in structured situations varying in density, sometimes to very high levels but rarely under unpleasant conditions. The natural social behavior of children has also been observed in conditions of varying, but rarely extremely crowded, densities. A reasonable development in density research with children would be the utilization of the types of measures commonly found in research with other populations, namely biological variables (e.g., heart rate, EEG, GSR) and more standardized or structured psychological variables (e.g., amount of material learned, attitudes toward situation, performance of task). (See Loo, 1973; Loo and Kennelly, 1977; Loo and Smetana, 1977.) The NDCS addresses the second suggestion. Complementary points can also be made regarding research with adults.

Despite the paucity of applied or program-applicable basic research on social environmental variables with children (density, group size, child/staff ratio, room space) and the near nonexistence in such research of information on long-term effects, greatest interest remains in developmental outcomes associated with variations in these variables. Conventional wisdom, professional experience and indirect deduction from programs in which ratio was only one of the environmental differences have substituted for empirical data in this area. Decisions affecting millions of children have been made on the basis of convention and the limited resarch available. In most cases, indices of early competence (DQ) and intelligence (IQ) have been the most frequent dependent variables used as measures of development in different group environments, to the exclusion of other intellectual and social measures and indicators of physical activity, growth, and biological process. This is in partial contrast with "laboratory" studies of variations in stimulation (e.g., Gesell, 1954; Rheingold, 1956; Brossard and Decarie, 1971; McGraw, 1935), and field experiments in early intervention, stimulation and day care (e.g., Skeels, 1966; Keister, 1970; Robinson and Robinson, 1971; Caldwell et al., 1970; Hunt et al., 1976). In these examples much information was sought on development defined more broadly than as DQ/IQ.

Fowler (1975) defends DQ/IQ as the index of choice in studying environmental effects on development, arguing that it is a construct which is reliable, standardized and as valid as can be expected for a measure which covers so broad a range of abilities. He says that staff/child ratio does have an important developmental impact on infants in the direction dictated by intuition: high-ratio (children per adult) conditions (1-2) are much more likely to be associated with favorable development than are low-ratio conditions (8 or more children per adult), as evidenced by the enhancement of low DQ/IQ scores, maintenance of high scores or a combination of both in high-ratio conditions. The middle range of ratio conditions (3-7 children per adult) was seen to provide effects between the low-and high-ratio extremes--neither very beneficial nor noticeably harmful.

Because no studies reviewed by Fowler isolate ratio or density as the sole source of variation (except possibly Skeels, 1942, 1966; Skeels and Dye, 1939), he was forced to compare outcomes of programs with extremely high ratios against those of extremely low-ratio programs; thus density was confounded with numerous other variables. Primary effects were not attributed to staff/child ratio per se, but rather to the increase in individualization and flexible personal attention possible when caregivers have fewer children to care for. Fowler also cited disturbances in linguistic, social and personality development in settings with extremely low ratios, but with little elaboration. It is critical to note, however, that a major difference between most low- and high-ratio settings studied was that the low-ratio settings were residential institutions in which the children had little or no contact with their parents, whereas the high-ratio settings were generally specially funded and designed daytime facilities for children who lived at home with at least one parent. This difference forces us to suspend any certain judgment on the effects of staff/child ratio on young children's development, despite the intuitive reasonableness of such a notion.

The weak effects noted by Fowler (1975) and others in the middle range of program ratios for day care intervention programs suggest that staff/child ratio does not operate very directly on developmental processes. In a very general sense, outcomes for these environments do fall between the positive effects found in high-ratio programs and negative effects found in low-ratio ones: children's DQ/IQs remain at or above expected levels for their population categories with virtually no harmful effects reported. One can also interpret these outcomes as an indication that ratio is not very important in determining long-range development. That is, even if immediate or short-lived behavioral variations were to be found, children would proceed to grow normally, possibly reflecting their daytime environments in other ways but not in classic measures of development. The results from these medium-ratio programs deserve special attention, both because they are more representative of ratios and environments found in day care and early education settings in the U.S. today, and because the lowest ratio in this range (1:7) is less than half the highest ratio.

Other reviewers (Meyer, 1977; Ricciuti, 1977; Willis and Ricciuti, 1975; Mathematica, 1977) refer to the same body of literature and other work dealing with dependent variables other than IQ. They also agree that high staff/child ratios can at best increase the likelihood of individualized, stimulating environments, but that the existence of such positive settings depends on other factors, most of which are related to the way caregivers structure their behavior. Meyer, in his detailed review of staffing characteristics and early childhood programs, points out that children exposed to high staff/child ratios are quieter, less aggressive, and have higher test scores. He adds, however, that group size, freedom to form natural clusters based on caregiver and child characteristics, program characteristics and philosophy and other classroom and staff attributes play important and sometimes more direct roles in child outcomes.

Staff/Child Ratio, Group Size and Density Studies with Children

Although there have been many studies of density, crowding and overpopulation with animals and human adults, they will not be reviewed here. The focus of this review is on those studies pertinent to understanding ratio, group size and density effects on young children. Included in this group are four studies which also examine, sometimes as mediating variables, effects on adult behavior in the child care setting (Asher and Erickson, 1977; Crayton et al., 1977; Tizard et al., 1972).

Of the 31 empirical studies reviewed, only two were concerned with variations in IQ or other psychometrically based measures of intellectual competence (Skeels, 1966; Tizard et al., 1972). Nine investigations sought effects on short-term measures of learning, problem-solving, or linguistic competence (Prescott and Jones, 1972; Brownell and Smith, 1972; Shapiro, 1975; Torrance, 1970; Parten, 1933; Rohe and Patterson, 1974). Virtually all the rest (and some of those already cited) assessed ratio, group size and density effects on various measures of social behavior, including social play and comunication (Asher and Erickson, 1977; O'Connor, 1975; Prescott and Jones, 1972; Reuter and Yunik, 1973; Shapiro, 1975; Vandell and Mueller, 1977; Hutt and Vaizey, 1966; Wolfe, 1975; Parten, 1933; McGrew, 1970; Bates, 1972; Ginsburg and Pollman, 1975; Arnote, 1969; Loo, 1972, 1976; Loo and Kennelly, 1977; Loo and Smetana, 1977; Rohe and Patterson, 1974; Crayton et al., 1977).

This review is primarily organized around an analysis of the social and environmental dimensions of measures of staff/child ratio and group size. Separate subsections will present research devoted to ratio, to group size, and also to social and spatial density, as these areas are closely related to group size. Although these four areas are discussed separately, the distinctions are not entirely natural: staff/child ratio effects are partly a function of group size, and depend not only on the numbers of people of all ages present, but also on the amount of space available. Research on the organization of space and resources in early childhood programs is highly relevant and will also be covered, albeit briefly.

Staff/Child Ratio. Shapiro's (1975) observations are among the more extensive ones made into the many aspects of nursery school and day care classrooms, including group size, teacher/child ratio, and uses of space. Shapiro visited 17 half-day classrooms with 274 four-year-olds, in order to examine the relationship between class size and individualization, the influence of space on children's involvement in activities, and the impact of various activity areas on children's and teachers' behaviors. The findings on class size and staff/child ratio indicated that the number of contacts experienced by the children increased with ratios up to 8 children per teacher, then decined from 1:8 to 1:11. Differences were also found as a function of class size (total number of children); less complex interactions (undefined) occurred with class size below 16 children, whereas with class size above 20 children the number of personal contacts experienced by a child alone was no longer related to teacher/child ratio.

Prescott's (1973) study in Los Angeles County day care centers is also a natural experiment in a number of settings, in which the inevitable confounding of ratio with age of children and types of programs is partly balanced by high ecological validity. In addition to observations in family day care and nursery home settings, data were also collected in day care centers having a closed format (teacher-centered group and individual activity, occasional free play, activity transitions administered at group level) and an open format (child-controlled choice making, child-structured play, transitions and choices initiated by children). The spectrum of teacher/child ratios was parsed into seven regions (2:1, 1:2-1:3, 1:4-1:5, 1:6-1:7, 1:8-1:10, 1:11-1:15, 1:16+), which were highly confounded with type of care; home-based care was overrepresented from 1:1-1:5, center-based care below 1:5, and closed-format centers almost exclusively below 1:11. Higher ratios (1:1-1:5) were associated with the following more individualized, child-initiated behavior likely to receive adult attention and feedback; more frequent active rejection of bids and requests and acceptance of help; more awareness of cognitive constraints, discovery of patterns, exploration, attention directed to adults, and giving orders and information; less looking, obeying, stereotyped responses, attention directed to children, and awareness of social constraints. Lower ratios (1:6-1:16+) were associated with more attention directed to the group, responding to questions, and mutual social interaction.

In summary, high ratios were more likely to promote individualized, growth-oriented interactions with adults, and low ratios were more often associated with group-centered interactions. Although the methodological problems in this study limit its generalizability, its attempt to integrate several aspects of the day care environment make it a model to be improved upon rather than cited and discarded.

Other natural experiments measured changes in preschoolers' social behaviors across variations in staff/child ratio and age mix (Reuter and Yunik, 1973; O'Connor, 1975), and sex and program type (Reuter and Yunik, 1973). The independent variables in these two studies were also seriously confounded, but their findings are worth mentioning. Reuter and Yunik found that in their low-ratio program, children interacted more frequently and longer with peers, while spending less time in social interactions with adults and in activities incompatible with social interactions. O'Connor found that in her low-ratio program, children showed greater proximity to social exchange, interest and positive attention vis-a-vis peers; less social exchange with, proximity to, and seeking reassurance from adults; and less social exchange with and interest in the group. Most of the results from these two studies follow the pattern that as teacher/child ratio decreases children spend more time in various types of contact with other children and less time with adults. However, lack of control and scope makes these studies only suggestive.

The Tizard et al. (1972) investigation is one of the very few available that examines effects of variations in early learning environments through children's ongoing behavior, test scores relevant to the hypotheses of interest and behavior of caregiving staff. Tizard et al. (1972) visited 13 residential nurseries in Britain which differed from one another on several structural dimensions: staff/child ratio, autonomy of the staff and group, stability of the staff, and the age distribution of the group (overall range 24-59 months). Since these measures were highly intercorrelated, each group was given a composite score in which higher scores represented "better" nursery environments. Forty-six children were given several cognitive and verbal standardized tests, while 85 children and their caretaking staff were observed on several measures of children's verbalization, staff activity, and staff verbalization. Relationships were then sought between nursery quality (of which staff/child ratio formed an important element), children's test performance and child and staff behavior. It should be noted that children in this study had similar background characteristics but were not controlled for entering test scores.

Staff activity was broken down into housework, physical child care, supervision, and reading and other play and social activities; staff verbalization consisted of informative talk, negative control, positive control, pleasure and affection, displeasure and anger, presentation of choices, and supervisory talk. The following were positively related to nursery composite scores: amount of social and child-active play, informative talk, commands accompanied by explanations, staff remarks answered by children and children's remarks answered by staff members. Negative commands by staff were negatively correlated with the nursery composite scores. With one nurse present in the nursery, increasing the number of children in the range from one to six had no significant effects on the rate of staff interaction with the children. However, increasing the number of staff present in this already high-ratio situation actually had the effect of decreasing staff interaction with children by about 40 percent, with a parallel rise in staff interaction with other staff.

Further observations were made of children's talking (whether a child spoke, to whom he spoke, whether he received an answer, and other verbal stimulation). The children were also tested on the Reynell Developmental Language Scales (assessing language comprehension and expression) and on the nonverbal section of the Minnesota Preschool Scale. Correlational analysis revealed that as the nurseries' composite scores rose (as staff/child ratio increased), the number of children's remarks answered by the staff also rose. A positive relationship was also found between the nursery score and the Reynell measure of language functioning.

In summary, as the quality of the nursery improves, one can expect an increase in quality of interaction between adult and children in the setting. Staff/child ratio is one important contributor to the nursery quality index, but since it was not always isolated completely from other components of the index, simple statements about its effects are impossible. The value of this study lies in its consideration of environmental impact on both chilren and adults in the nursery setting. Although the resulting data are not definitive, they do permit empirically based speculation about the relationships among environmental factors, staff behaviors, and child outcome measures. It appears that there is reason to further test the hypothesis that many of the effects of the nursery or day care environment on children are mediated by the environment's impact on the functioning of adults in the setting.

In addition to naturalistic studies like those just discussed, four studies were found which qualify as experimental investigations of the effects of variation in staff/child ratio on young children. One of the most frequently cited studies of this type is Skeels' intervention into the lives of 13 institutionalized mentally retarded infants (Skeels, 1942, 1966; Skeels and Dye, 1939). The experimental infants were removed from the normal nursery environment at a mean age of 19.4 months and placed in cottages of older and somewhat brighter girls. The adult/child ratio experienced by these infants underwent a drastic change as a result of this move, shifting from 1:15 in the nursery environment to 30:1 in the cottages. Following an average stay of 28 months in these special circumstances the group's mean IQ had risen from 64.3 to 95.5, and 11 of the 13 were adopted immediately following the experience. When visited in adulthood, around 1960, the experimental group members were found to be indistinguishable from most residents of a middle-class community in the Midwest. A contrast group of 12 children was followed during the period of special placement for the experimental group. Children in this group actually experienced a decline in mean IQ, from 86.7 to 66.1, and all remained in the state institution at least until early adulthood.

The differences in outcomes for the two groups is very dramatic, but as was suggested in the first section of this paper, one must be cautious about generalizing from institutional environments to day care centers. Although the shift in adult/child ratio was a most salient aspect of the change in the circumstances of the children, the difference in ratio was confounded by several other environmental changes which doubtless enhanced the experimental effect: special treatment for the children, a change of physical setting, pseudo-adoption by particular women in the cottages, and so on. However, many of these other environmental differences can be thought of as variables which mediate the change in ratio, and the results are at the very least highly suggestive.

Unfortunately, an examination of the empirical literature uncovers no controlled experiments designed to assess the impact of variations in staff/child ratio on standardized measures of intelligence in children. However, two studies were found which examined the immediate effects of ratio and group size on language and educational performance. Dawe (1934) measured story retention and degree of participation in a discussion of new material among a group of kindergarten children. Number of children in the classroom and distance from the teacher while the story was read were the independent variables assessed. Dawe found that story retention was not affected by changes in either number of children per teacher or distance from the teacher. However, measures of the proportion of children engaging in the discussion, the total amount of discussion, and the average number of remarks made all decline as distance from the teacher increases.

In another, more recent experiment concerned with young children's communication, Brownell and Smith (1973) created groups consisting of one teacher and one, two or three four-year-old children. A fourth grouping was formed consisting of three children and a teacher who was instructed to remain inactive. During a discussion of the uses of a set of familiar objects, the children's speech was recorded and coded for mean length of utterance and an index defined as length of verbalization minus mean number of repetitions. The only statistically significant comparisons were that both length of verbalization and the corrected index were smaller in the one child per teacher groups than in those with a ratio of 1:3. The fact that there was less conversation when one child was paired with an adult than when three children were present is at first glance counter-intuitive. Given that the task was to talk about a set of familiar objects, the effect may be due to the greater efficiency in communication between two people than in a group of four. At best, however, this is an ad hoc explanation and the unexpected trend in the data cautions against a simple view of assessment.

There are two additional studies of staff/child ratio which are of particular importance because they attempt to systematically control some of the variables which qualify the effects of ratio per se. The first of these was an exploratory study conducted by Asher and Erickson (1977). This field experiment involved observations in three adult/child ratio conditions (1:4, 1:8, 1:12) and two group size conditions (1:8, 2:16) during morning free play sessions. Of 10 adult behaviors recorded, five increased as the ratio decreased: number of vocalizations to children, touching children positively, bringing body to children's level, moving about the room, and number of children within three feet of the caregiver. Only touching children positively changed significantly with group size, increasing with larger group size. These results were interpreted as reflecting the increase in demand and work load experienced by the caregivers as staff/child ratio decreased. These findings seem to indicate that as ratio decreases and group size increases, each child experiences less interaction with caregivers, although the caregivers engage in more overall intearction.

Effects on the children's behaviors were more complex. As staff/child ratio decreased, three out of four children's behaviors involving the presence or proximity of the teacher decreased in level (vocalizing to teacher, touching teacher positively, and remaining within 3 feet of the teacher). On the other hand, none of the six child behaviors not involving the teacher's presence--involving the child alone or the child and a peer--rose or fell with changes in ratio. The authors concluded that the effects on teacher-related child behaviors were to be expected simply as a result of decreasing accessibility of the teacher as more children competed for her attention. It was not be expected, however, that their solitary or peer-related behaviors would be immune to ratio changes, because the particular manipulations employed consisted of adding more and more children to the group, thus increasing the likelihood of children's contacts with one another of various sorts. That such increases did not occur suggests that the children were acting to maintain a comfortable behavioral profile despite actual variation in peer social density.

The second study (Crayton et al., 1977) actually manipulated the ratio of preschoolers (3-5 years) to toddlers (18-30 months) while maintaining a constant adult/child ratio of 1:3. Observations were made in two play situations, one structured and the other free. Group size was held constant at 12, and ratios of preschoolers to toddlers were 0:12, 6:6, and 9:3. As preschooler to toddler ratio increased, caregivers used fewer commands and asked more questions. In the free play sessions teachers participated less and spent more time in such activities as looking on and cleaning up than they did in more structured play sessions. The behavior of the children also varied as a function of ratio of preschoolers to toddlers. As the ratio increased, the amount of behavior judged inappropriate first rose and then fell in curvilinear fashion. Inappropriate behavior and vocalization were also higher in free than in structured play.

In summary, there is too little consistent, well-collected information to permit firm conclusions about the impact of adult/child ratio on behavior in the day care setting. Although one is tempted to extrapolate the findings reported by Skeels (1966) and by Tizard et al. (1972) to day care policy questions, the data were collected under conditions of insufficient control and in residential institutions rather than in day care centers, and staff/child ratio was confounded with too many other factors (e.g., pseudo-adoption).

Several other investigations (O'Connor, 1975; Reuter and Yunik, 1973; Shapiro, 1975) confounded teacher/child ratio with group size in various ways. Their results can also be interpreted as showing that as ratio increases, interaction with peers rises along with adult-structured and controlled behavior, while individual interaction and contact with adults declines. The two experimental studies of verbal behavior in structured situations gave somewhat contradictory results. Dawe (1934) found children's participation in class discussion fell off as a function of their distance from the teacher; Brownell and Smith (1973) recorded less conversation when one child was paired with an adult than when three children were assigned to one adult. The latter finding may be due to the nature of the group's task; two people can be much more direct and efficient than four. In one of the more carefully controlled studies in this area, Asher and Erickson (1977) observed that only teacher-related behaviors of children were (negatively) affected by decreases in teacher/child ratio. These results were taken to be indicative of ratio as a measure of teacher accessibility, while the absence of non-teacher-related effects was tentatively thought to reflect a rudimentary system of social self-regulation. Finally, the Crayton et al. (1977) study is important in that it suggests a means of varying caregivers' work-load, and therefore their accessibility, without manipulating the total number of children. Older chilren are apparently, and within limits, easier to manage, and may even help in management of younger children.

Perhaps the most interesting trend in these data is the suggestion that maintaining staff/child ratio while increasing total group size may reduce the availability of adults from the child's perspective, because caregivers tend to spend more time in interaction with the other adult(s) present (e.g., in Tizard et al., 1972). Obviously group size is an important variable in its own right, but it begins to seem that its interaction with other dimensions of the day care environment is also important.

Group Size. Research on the effects of group size on children's behavior and development is not much more consistent and direct than that on adult/child ratios, even though group size is a simpler and more general concept. Group size should be considered closely related to social and spatial density, which will be discussed in the two subsections below.

Many of the issues relating group size to prediction of program quality have been raised in an ecological framework by Prescott and her associates (Prescott and Jones, 1972). A survey using both observational and interview methods at 50 day care centers (out of a field of 380) in Los Angeles is pertinent to the present topic of social environmental effects on teachers' behavior. Information was sought on various aspects of teachers' behavior: communicative or uncommunicative quality; apparent purposes; and amount of teachers' behavior judged to encourage verbal skills in children.

In this study, designed to be sensitive to complexity, complex relationships were found. Preschool children in the 50 programs were observed in settings with ratios ranging from five to 14 children per teacher, engaged in both "essential" activities (lunch, snack, cleanup/toileting, nap) and "optional" activities (free play, free choice, teacher-directed group activity, teacher-directed individual activity). Teachers' communicative activity first increased with an increase in number of children, and then decreased at a total group size of about 19 children. The lower range of group sizes (5-9 children) was associated with most of the instances of free choice given children by the teachers. Overall, however, factors such as the organization of space, program format, and staff development were regarded to be more important than teacher/child ratio and group size. The structural ecology of a program was discussed in terms of forcing choices for teachers or giving them flexibility. It is reasonable to expect that abilities and characteristics of teachers will be more likely to have an impact on children in their care when the environment is organized to give them flexibility.

Of the other nine group size studies reviewed, seven can be considered true experiments and the other two nonmanipulative observational studies. Three studies deal chiefly with learning or language behavior (Torrance, 1970; Brownell and Smith, 1973; Dawe, 1934), four deal with social and interpersonal behavior (Asher and Erickson, 1977; Vandell and Mueller, 1977; Parten, 1933; Wolfe, 1975), and two overlap cognitive and social domains (Shapiro, 1975; Williams and Mattson, 1942). None of these studies assesses anything but immediate behavior, although sometimes the children observed have been in a particular setting for many months.

Play group size was one of several activity variables recorded by Parten (1933) in her observations of 34 children between two and five years old. In this naturalistic study, the children's choice of playmates, types of toys and activities, and degree of leadership were recorded, as was the "social value" of their play. Social value, or degree of participation, was a rather ordinal dimension created by Parten which has achieved lasting descriptive value in child development research. In this study, the participation-in-play dimension consisted of six modes of an individual child's activity: unoccupied, solitary, and onlooker play activity, which are self-defining; parallel play, in which two or more children engage in solitary play close to one another, without any real exchange but aware of one another nevertheless; associative play, in which two or more children are doing the same thing, but without interchange or organization; and cooperative or organized play, identified by the mutual discussion and assignment of separate roles to create a truly joint activity. Some of these definitions are found in Stone and Church (1973).

Group size in Parten's study ranged from two to 15 children, with the modal configuration being two children, regardless of age. However, larger groups were increasingly likely to be composed of older children. Since older children were the ones found at higher levels of participation and in more complex games involving numerous children, the fact that play group size was positively associated with sophistication of social activity is difficult to interpret. In this case, of course, number of playmates and activity were both determined by the children themselves, and not specified as an independent or classification variable by the investigator. The point can be made (Edward Mueller, private communication) that the number of associates and the level of participation chosen by a child are both expressions of the amount of social information and interactive complexity which he can handle--a sort of behavioral carrying capacity. The relationship between children's self-selected play group size and total group size is not known at present.

Shapiro's observational survey of four-year-olds in nursery school classrooms was discussed above in the subsection teacher/child ratio. It should suffice to repeat her results that so-called complex child contacts increased as total group size rose above 16 children, and that the ratio effects no longer held at the larger group sizes.

Of the three group size studies devoted to learning and language development, two were discussed in the teacher/child ratio subsection. In review, Dawe (1934) found that kindergartners' distance from the teacher (a version of group size) reduced only the percentage of children participating, the total amount of discussion, and the average number of remarks per child; Brownell and Smith (1973) observed that two children with their teacher had longer verbalizations than one child with the teacher. Torrance (1970) assigned pre-primary children to groups of four, six, 12 or 24 members, and administered his "Ask and Guess Test" (presumably a divergent thinking exercise). He found that the number of questions which children asked concerning stimuli decreased as group size rose, while the number of repetitive questions rose with group size. Torrance also concluded that young children may have trouble controlling themselves and delaying their responses in larger groups.

Two recent experiments with toddlers examined changes in children's social behaviors with varying group sizes, using different methods. In the Asher and Erickson (1977) study described previously, 16 children (mean age 19.2 months) were observed in their classroom in two group sizes at constant ratio (1 teacher:8 children, 2 teachers:16 children). Of ten child behaviors and ten teacher behaviors observed, none of the former and only one of the latter (teacher touching child positively) differed significantly as a function of group size (although a MANOVA yielded an overall significant teacher effect).

The second group size experiment recorded toddlers' (age range 16-22 months) social activity in either dyads or small groups of four to six children (Vandell and Mueller, 1977). The children, who were enrolled in a play group during the six months of the study, were also watched for increasing familiarity with one another as measured by a number of indices of "socially directed behaviors" (SDBs). First, group size was found to interact with familiarity in that several SDBs increased over time in the dyad, but not in the small group. Second the ratio of dyad SDB level to group SDB level increased over time for each SDB, and over the whole study the dyad levels were greater than the group levels. Finally, there were no dyad versus group differences in the complexity of SDBs (sequences or coordinations of simple SDBs).

Few firm conclusions are possible from the group size literature. As group size increases, young children either verbalize more (Brownell and Smith, 1973; Shapiro, 1975), less (Vandell and Mueller, 1977), both more and less (Torrance, 1970; Williams and Mattson, 1942), or neither (Asher and Erickson, 1977; Dawe, 1934). Only the Asher and Erickson and Vandell and Mueller experiments were set up to measure differences in stimulation from the natural environment of peers. Neither study supported the intuitive hypothesis that amount of stimulation from other children should be proportional to size of group. The results of the former study were taken as supporting a social regulatory mechanism, while those of the latter were interpreted in terms of toddlers' limited capacity for social interaction, admittedly similar concepts.

Social Density. Due to the growth in interest in crowding and natural group behavior over the past decade, research on density (number of individuals in a given area) has begun to subsume that on group size. The notion of density is especially useful for organizing social and physical sources of stimulation in children's programs. Studies of social density, which vary the group size within a constant area, are discussed in this subsection; studies of spatial density are covered in the next subsection. An overall sumary of density effects will follow the latter.

Five research studies were located in which social density was inspected as a factor in children's behavior. Four out of these five were experimental in design. In the earliest one of these, Hutt and Vaizey (1966) varied the number of autistic, brain-damaged, and normal (i.e., not hospitalized for psychiatric reasons) children between three and eight years old in a hospital playroom. Results for the normal children showed that as density rose aggressive/destructive behavior rose significantly, social interaction fell, and no significant effect was found for time on boundary.

The operational distinction between social and spatial density was explored in McGrew's (1970) experiment, in which the density of a four-year-olds' classroom was varied both by adding and subtracting children and by expanding and shrinking the space. When social density was increased (children added to group) children spent less time in intermediate proximity and alone. As spatial density was increased (space reduced from 100% to 80% of room), the children spent more time in close proximity, and less in intermediate proximity and alone. McGrew concluded that the young children in her study were able to deal with changes in density, maintaining their comfortable interpersonal distances.

In a nonmanipulative observational study by Bates (1972) a group of 3-1/2-year-old children were observed during morning and afternoon free play in their regular nursery school classroom. As density increased, girls spent more time alone, in small groups with other girls, in room center and in conflict; boys reduced their locomotion, played in larger groups and also increased conflicts. Bates mentions that as density increased, boys' behavior began to change at lower levels of middle densities and stabilized at lower levels of high densities than did girls' behavior.

Chalsa Loo has provided some of the most carefully conducted research on density as a factor in children's behavior and social perceptions. Three of her studies will be reported in the spatial density subsection which follows. One of her spatial density experiments (Loo and Smetana 1977) and the social density experiment to be discussed next (Loo and Kennelly 1977) are the first and only controlled studies of the social-physical environment which combine children's natural behaviors and subjective impressions to uncover patterns or systems of effects (using multivariate statistical techniques).

Loo and Kennelly (1977) exposed 72 five-year-old boys and girls to low-density or high-density conditions during 54-minute free play sessions and found significant effects for social density and sex, but not for a third independent variable, personal space (an individual difference classification), nor for any statistical interactions. The study also found that as density increased, activity-aggression-anger, negative feeling, and distress-fear rose while social interaction fell. In addition, some sex differences were noted.

Spatial Density. In the McGrew (1970) experiment described in the previous subsection, the effects of varying the size of the room between 100 percent and 80 percent of its normal area were that the preschool children spent less time in intermediate proximity and alone, and more time in close proximity. McGrew's conclusion due to the last finding, that her children were less able to adjust to manipulations of spatial density than of social density, provides some support to other researchers' intuition that aggressiveness would be particularly affected by spatial density.

Shapiro's (1975) observations of class size, child/teacher ratio, activity areas and play space led her to a three-way classification of four-year-olds' "noninvolved" behavior (onlooking, random, and deviant). Deviant behavior was observed at its highest levels in classrooms with less than 30 square feet per child; random behavior was highest where each child had at least 50 square feet. The optimum range of areas, 30 to 50 square feet per child, had the lowest levels of all three noninvolved behaviors.

Five experiments in spatial density stand out for their design and potential for application to actual day care and nursery school settings. Arnote (1969) visited two day care centers and varied the amount of play space in a room in each. The three areas were 350, 225, and 140 square feet. With seven preschool children (2-1/2 to 5 years old) in each play group, her reciprocal density levels were 50, 35 and 20 square feet per child, respectively. Arnote recorded all aggressive acts during free play and grouptime periods in both centers. She found an increase in aggressiveness as spatial density rose, but no differences between the activity periods.

In two of Loo's experiments (1972, 1976), effects were sought for density, sex and their interaction. As density increased in her first study (from reciprocal densities of 44.2 square feet/child to 15 square feet/child), aggression and number of social interactions decreased. Also, boys interacted with more children, were more aggressive, were interrupted less often and were less nurturant than girls; boys diminished their aggressiveness significantly more than girls as density increased (girls' aggression was very low at both densities). In the second study, as density increased (from reciprocal densities of 43.4 square feet/child to 21.8 square feet/child) the children became more aggressive, passive, avoidant and unstable in their activities, and also engaged in less self-involved behavior. Boys were more aggressive and interactive, less nurturant, and interrupted less than girls. Interactions were also found between the independent variables.

Loo's third spatial density experiment (Loo and Smetana, 1977) parallels the sophistication and richness in description of child variables found in Loo and Kennelly (1977). Here, 80 10-year-old boys played for 60 minutes in well-stocked play groups of five children each, in low density rooms of 260.5 square feet (reciprocal density = 52.1 square feet/person) or high density rooms of 68 square feet (reciprocal density = 13.6 square feet/person). Two additional independent variables were personal space (an individual difference dimension denoting a person's relative comfortable approach distance), and degree of acquaintance with playmates (absolute strangers or familiar classmates). Once again, dimensions described by approximately 30 separate variables were inspected: children's perceptions and emotional reactions, motoric levels and activity types, play quality, interaction quality and point strategies.

When their data were factor-analyzed, Loo and Smetana found that most of the variables loaded onto five factors: discomfort-dislike of room, activity-play, avoidance, positive group interaction and anger-aggression. A

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multiple analysis of variance revealed significant effects for density, degree of acquaintance, personal space style, personal space acquaintance, and density by personal space by acquaintance interactions. Analyses of variance on the factors as dependent variables showed that as density increased, discomfort-dislike of room, activity-play and avoidance rose. Various complex implications were also identified for personal space style and degree of acquaintance, most notably that effects due to those variables were most pronounced in the low density condition. An important discovery upon inspecting the correlations between elementary variables as a function of density was that rough play (an observation item) was associated with other types of play only at low density; with less space available rough play led to aggression more often.

The notion of density forces us to consider the social and physical factors in the environment in concert, yet the two dimensions along which density is manipulated--social and spatial--are difficult to separate operationally. Social density (varying group size in a give space) is naturally associated with other interpersonal sources of stimulation, such as teachers' behaviors, developmental range of children in the group and familiarity of the individuals with one another. Spatial density (varying available area) falls in a class with architectural and sensory properties of a setting, children's familiarity with the setting and number and variety of resources in the space. In fact, the availability of resources is normally tied to the size of a setting, and changes in the two might be expected to yield similar results in children's behavior.

In an experiment conduced by Rohe and Patterson (1974), spatial density and material resources were varied independently of one another. Twelve preschool boys and girls (average age 46 months) played with a teacher present with two room sizes (288 square feet, reciprocal density = 24 square feet/child; 576 square feet, reciprocal density = 48 square feet/child), and two resource levels (the high resource condition gave the children twice as many toys and other materials as the low resource condition). Observers recorded behaviors in social interaction (unoccupied, solitary, parallel, associative, aggressive), participation (relevant, irrelevant), constructiveness (constructive, destructive) and area in use (blocks, kitchen, jungle gym, art and puzzles). As density increased, aggressiveness, destructiveness and unoccupied behavior increased, while relevant and constructive activity diminished. Children also played more in the kitchen and less in the art and puzzle areas. As resources decreased, cooperative, relevant and constructive behavior dropped, while irrelevant activity rose. Children played more on the jungle gym in this condition. Boys were more aggressive and destructive than girls, and were observed less frequently in unoccupied roles. High density and low resource conditions were typified as being highest in negative behaviors and lowest in positive ones. The authors discussed their findings in terms of designing physical settings to fit program needs.

One can draw two general conclusions regarding the effects of increasing density from these studies. First, aggressive behavior rises. Most of this research has been at least partly concerned with negative social consequences of changes in density. The "popularity" of this issue has been accompanied by a wide variety of rigor and range of definitions. Arnote (1969) and Shapiro (1975), for example, employed global, on-the-spot criteria, whereas Hutt and Vaizey (1966) and Loo (1972) used a few distinct and narrowly defined ones. The technique found in Loo's more recent experiments (Loo, 1976; Loo and Kennelly, 1977; Loo and Smetana, 1977), and applicable to Rohe and Patterson's (1974) study, of precisely specifying several aggression and quasi-aggression variables and then seeing what if any patterns emerge empirically, seems to preserve the flexibility and sensitivity to the immediate situation of the first examples with the detail and reliability of the second. It should be noted that sex and individual differences exist in aggression at different density levels, and that other behaviors such as "helping in distress," "number of interruptions," "passivity," and "rough play" are not necessarily highly correlated with aggression.

The second conclusion regarding effects of increasing density is that social interactions either drop absolutely (Bates, 1972; Hutt and Vaizey, 1966; Loo and Kennelly, 1977; Loo and Smetana, 1977; Rohe and Patterson, 1974) or remain unchanged when they would be expected to rise (Asher and Erickson, 1977; McGrew, 1970). Once again, methods and definitions are important, and certain variables and special categories can probably be identified which rise with density.

In their discussion, Loo and Kennelly address the discrepancy between the Loo (1972) finding that agression decreased with increasing spatial density and the increase in aggression found by most other studies. Taking into account differences between social and spatial density, amounts of material resources, and artifacts of repeated measures designs, these authors suggest the strong possibility of a curvilinear relationship between density and aggression. They urge conceptualization of density effects in absolute terms of area per person rather than in relative terms of high and low density. This need not be restricted to aggression, since social and learning processes are just as important in young children's group environments. Finally, the availability of multivariate analysis techniques argues for the desirability of numerous precisely defined dependent variables which may be conceptually related to one another over a few broad categories.

Studies of Equipment and Spatial Organization

Staff/child ratio, group size and density account for only part of programs' environments. Consideration of their effects on behavior and on program quality must take into account numerous other environmental and experiential factors. Although it is not within the scope of this paper to analyze all sources of variation in the day care environment, some research concerning two closely related dimensions will be reported here in an attempt to give perspective to the policy variables already discussed. These dimensions are material resources, play equipment and spatial organization.

The inclusion of equipment and spatial organization as important dimensions of variation can be justified from the programmatic point of view in that they reflect the teacher's choices in arranging her professional setting, information no less important than the teacher's behavior and daily activity plans. For example, Prescott rated the "softness" of four types of day care settings: closed and open centers and family style and nursery homes (Prescott, 1973). Softness refers to the responsiveness of the environment, especially on a proximal sensual level. Examples of "soft" elements are sand, laps to sit in, rugs and carpeting, and messy matrials. In closed center settings teachers decide how children will be engaged and direct both individual and group activity, and activity transitions are made as a group. In open centers, children's choice-making is encouraged, all activities are available to children, and activity transitions occur when individual children are ready. The average softness ratings of closed centers were much lower than those of open centers (Prescott, 1973, 1974). While softness is at present a notion which is difficult to define precisely, it is representative of a variety of attempts by researchers to assess the potential for positive responsiveness, individualization, and safe-yet-attractiveness of children's settings (e.g., Asher and Erickson's (1977) teacher-at-child level, or the colloquial "warm lap index").

By far the best time to observe the effects of program differences on amounts and types of materials is during the children's free play. There are several reasons for this. First, preschool children spend much of their waking time at play. Second, while the teacher's and program's influence over the children may be of ultimate interest, during free play the children are operating more or less under their own volition, selecting toys and occupations without someone else's direct guidance (although the amount of free play varies from program to program). In a sense, children's behavior during free play serves as an evaluative statement of the program's success in fostering independent decisionmaking skills. Third, few standardized measures exist which reflect the quality of an early childhood program more validly than the children's actual behavior.

Numerous studies of children's play have been reported in the past forty years, many concerned with the importance of toys, constructive materials and other equipment. Of those to be mentioned here, two have become child development classics (Parten, 1933; Johnson, 1935), while three recent studies qualify as true experiments (Rohe and Patterson, 1974; Scholtz and Ellis, 1975; Finkelstein and Wilson, 1977).

Parten's (1933) naturalistic observations of preschool children between two and five years old were discussed in the previous subsection on group size. Among the many items noted during instances of children's play were the specific type of toy and occupation and the social value of the activity (social value is the location on Parten's participation scale from unoccupied to solitary through organized play).

Of 110 different occupations observed, eight occurred at least 99 times: sandbox (recorded 330 times); family, house and dolls (178 times); trains (151 times); kiddie-cars (146 times); cutting paper (122 times); clay (119 times); swing (102 times); and building blocks (99 times). Some of these activities were especially suitable for observing developmental change, both because children interacted with them differently according to their developmental levels, and because the children had varying opportunities to observe one another and thus benefit from social contact. For example, sandbox play was associated with parallel play in younger children, parallel and cooperative play in older children; house and trains were also solitary solitary occupations for younger children and cooperative for older; all levels of participation were observed with constructive materials, especially blocks; swings engendered chiefly parallel play.

Two great values of play with toys are that it is interesting for children both to do and to watch; the latter is often followed by active exploration and play. Toys are in effect little theaters in which children are both audience and actors, changing roles as the desire and ability present themselves. Today as much as earlier, the balance between active involvement and observation--parallel play--is regarded as critical to the formation of peer relationships (Mueller, personal communication, 1977), and to the learning of culturally salient skills (Bruner 1972; Fishbein, 1976). Although Parten's participation dimension was not derived from any particular theory, her observations are compatible with several developmental frameworks.

Basing her thinking partly on Parten's observation of toys' effects on social play, Johnson (1935) varied the amount of equipment on young children's (3 to 5 years) playgrounds. In two related substudies, she either removed or added equipment, after observing children's play with the initial complements. In both substudies, five categories of behavior were observed: bodily exercise; play with materials; undesirable behavior; games; and contacts with teacher.

When 35 children played on their familiar playground with a reduced amount of equipment, play with the remaining materials increased, as did games and peer contacts, while exercise decreased. The effects on 75 other children of adding equipment was also a decrease in exercise, and an increase in use of new play materials (the children played three times as much with the new equipment as with the old). Social contacts and conflicts also decreased as equipment was added, but not as significantly as the other effects. While Johnson reported her results quite fully, little initial detail was given on the amounts and types of equipment present in the various treatments, pre- and post-change. Also, some of her effects can now be explained in terms of wariness and curiosity in the face of novel stimuli, and her experiment may be criticized because of design problems.

In an experiment discussed in the previous section, Rohe and Patterson (1974) varied the amounts of toys and other resources available to 12 preschool children (average age 46 months) in a day care classroom, in addition to their spatial density. The high resources condition provided twice as many items as the low resources condition. The effects of increasing resources were to raise levels of cooperation, relevant behavior and constructiveness and to lower irrelevant behavior; the children also played more on the room's jungle gym. The authors conclude that negative behavior associated with competition for resources can result from decreasing those resources, increasing the density or combining those factors.

Finkelstein and Wilson (1977) varied available resources by placing pairs of children in a laboratory setting with no toys, one toy or five toys. These researchers found an increase in peer interactions when toys were limited. They observed more of both competitive and cooperative play when only one toy was present than when there were five available toys. As with the staff/child ratio and group size topics, the soundest knowledge currently comes from experience and intuition.

Shapiro's (1975) survey of 17 preschools included assessments of children's behavior in qualitatively different spaces. Her category of noninvolved behavior increased in inadequately organized space (i.e., unclear boundaries, activity areas too small, large unfilled spaces). She also observed a disparity between the activity areas preferred by teachers and those most popular with the children. This might be interpreted as an age-difference in certain kinds of values, which may provide one framework for studying the actual uses of space. Acting as a participant observer, Schak (1972) studied the play values of Oriental working-class children whose families were in transition between lower- and middle-class status. He observed that these children played indoors a great deal (as do middle-class children), but with neighborhood children (as do lower-class children). Here, too, values seem reflected in use of play space and play choices.

Three rather similar, essentially normative studies sought to describe the ecology of preschool play settings. Shure (1963) observed four-year-old children in the different areas of the nursery (art, books, dolls, games and blocks) on six dimensions: density of children within one area; appropriateness of activity to a locale; mobility of children into and out of an area; quality of emotions and affects; complexity of social participation; and constructiveness with play materials. Clarke, Wyon and Richards

(1969) also recorded preschool (average age 45 months) children's behavior as a function of age, sex, parity, location in room and other factors. In addition to correlating activities and areas with individual variables, Clark et al. noted friendship and group patterns in the two classes studied. In the third nonmanipulative preschool environment study, Melson (1977) looked for sex differences in toy selection and movement patterns, with attention given to the area of the room in which children were located. The consensus of these three investigations regarding arrangement of play space and children's behavior is not very revolutionary: preschool children generally play as they are expected to in particular areas of the classroom. Sex differences do exist in activity preferences and movement patterns: girls prefer art, dolls, and books more than boys do; boys prefer blocks and large motor games; girls are more likely to be found in solitary activities than boys (girls' social maturity relative to boys' notwithstanding) and seek adults' attention more frequently. Few other specific conclusions can be made from studies such as these.

A natural experiment by Fiene (1974) combines an awareness of the behavioral ecology of preschool settings with well-defined and standardized dependent variables. In two closely related studies, Fiene looked at variations in the frequency and complexity of children's and adults' verbalizations associated with different daytime environments (family day care, center day care, the children's homes) and activity areas (dramatic play, free play, cognitive games, blocks, art). Sixteen children were observed in each type of setting. In the first study, adults and children verbalized more frequently and in more complex ways in the family day care settings than the home settings, whereas children in the second study spoke at more sophisticated levels in dramatic and free play areas than in the cognitive games, blocks, and art areas. Combined results for the two day care environmnts revealed a setting by activity areas interaction; the activity area effect was greater in center care than in family day care. One explanation offered by Fiene was that activity areas in center day care were more valid and genuinely specialized ("as-labeled") than those in family day care. Another possibility, drawn from general experience in family and center day care, is that teacher/child ratio varies more between activity areas in centers than it does in home-based day care. Unfortunately variations in ratio were not included in this report.

The most useful and integrated work on spatial organization of young children's settings is a monograph by Kritchevsky and Prescott (1969), which begins by underscoring the importance of the relationship between physical space and program goals and types. A study was designed to answer several questions regarding the form and quality of center space: the effects of space on children's and teacher's behavior, the best physical settings and the creation of a general analytic framework. Indoor and outdoor spaces were analyzed into elements: potential units (empty bounded spaces); play units (areas containing something to play with); boundaries; paths; and dead spaces. The spaces were then scored on five dimensions: spatial organization; complexity of equipment; variety of equipment; amount to do per child; and special problems. In spaces given high quality scores, teachers were observed to be friendly and sensitive to children's needs, children interested and involved, with relatively high proportions of lessons in consideration, creativity and nonroutine encouragement. In low quality spaces, teachers were neutral and insensitive, children uninvolved and uninterested, with lessons characterized by high proportions of guidance, restrictions and rules.

Finally, Rohe and Nuffer (1977) have conducted the only experimental research in this area by manipulating density and spatial organization in a day care setting. Density was varied by decreasing by one half the size of a room 22 feet by 33 feet. Arrangement of the space was either open, or partitioned into 5 distinct activity areas. The twelve children in the sample ranged in age from 40 to 68 months, and all children were exposed to the four different environments formed by independently varying density and partitioning. The children's social interactions were coded on five dimensions including cooperation and aggression. Each child was also rated on relations to the physical environment and affect. In the high density conditions, the children engaged in less associative and cooperative behavior. Aggressive behaviors did not, however, increase. As density rose, use of the puzzle area and the kitchen decreased, perhaps because the concentration required for these activities was more difficult to maintain in the more crowded situation. There was a corresponding increase in use of the jungle gym in the high density condition. Partitioning the space increased cooperative behavior and decreased aggression, regardless of the density condition. One of the most interesting findings from this study involved an interaction between partitioning and density. It seems that partitioning the space increases constructive interactions in the high density condition, but not in the low density condition. In some circumstances, high density can enhance positive components of the child's behavior.

Summary of Behavioral and Developmental Effects of Policy-Relevant Variables

In the preceding section of this review, environmental variables in the day care setting have been analyzed according to stimulation originating from different sources--beginning with a social versus physical distinction.

Reviews of about 30 empirical studies of adult/child ratio, group size and social and spatial density, nearly 10 examples of research in play materials, activity types and spatial organization, and a number of review and concept papers on these topics were included in an attempt to understand the effects of staff/child ratio and group size on children's behavior and development in day care. Analysis of this information has had as a practical goal developing a more systematic and empirically based definition of day care environmental quality than has existed previously.

A brief summary of the behavioral and developmental effects of these policy-relevant environmental variables follows. First, however, a few general conclusions must be drawn. Results--even in the overall direction of developmental effects--are inconsistent across studies. Studies vary widely in definition of variables and measures and sample size. Many studies suffered serious confounding problems.

Increases in staff/child ratio (more staff to children) were accompanied by rises in teachers' activity, but not in teachers' individualized treatment of children. In addition more passive (e.g., looking at others, interrupted activity) or responsive (e.g., contacts with others, answering questions, obeying commands). Child behavior were observed, and there were drops in self-initiated, individualized behavior (e.g., rejecting requests, giving information, mutual discussion). Inconsistent trends in broad domains such as interaction with others were difficult to summarize.

As group size increased, most teacher behavior was not affected, although communication and contact with children rose. Older children's interaction with others rose in most areas (e.g., social interaction, verbalization, friendliness), as did seeking privacy and avoiding stimulation. Two measures associated with maturity of behavior fell, however--children's nonrepetitive questions and egocentric speech.

Social and spatial density are generally confounded with the group size variable, since there are usually no records of room areas (square footage) in which observations were made. In many cases, as density increased, aggression and conflict, "deviance" and destructiveness rose, as did passivity and avoidance of stimulation. Social interaction and duration of and number of participants in each aggressive incident (which can be considered a form of social interaction) dropped as density increased.

Other variables more directly related to density than to group size or ratio were also reviewed. Larger amounts of play materials were associated with relatively less play with children than with objects, but of a more desirable (i.e., constructive, friendly) nature than with fewer toys. Likewise, well-organized and diversified play spaces led to more appropriate social play and use of materials. When free play was contrasted with structured play in one study, children's overall interaction was less appropriate in the former than in the latter. Caregiving staff also engaged in less interaction with children, and spent more time in other activities in free play than in structured play.

Linking Staff/Child Ratio and Group Size with the Literature: A Simple Model for Further Analysis

Unfortunately, exceedingly little of the research discussed here has been generated from anything close to a theory of environmental effects on human behavior and development. As was mentioned much earlier, the most cohesive among several investigations have been the results of common interest or practical experience. In a few cases, experiments were designed to follow phenomena based on researchers' intuition and curiosity, and mechanisms were proposed *post hoc*. The best example of this is in social and spatial density, in which quasi-theories have been offered by Altman (1975) and Freedman (1975). It is Freedman's "density-intensity" hypothesis which lends itself most readily to predictions with the current information.

Freedman, basing most of his thinking on a number of laboratory experiments in spatial density with adult subjects, suggests that density or crowding per se does not change people's behavior, but rather serves to intensify their typical reactions to a situation (1975). That is, variations in density itself do not create changes in aggression, social interaction, task performance, arousal or other psychological dependent variables used in this research. Effects of factors within a setting such as sex or individual personal space styles, or between settings such as participants' familiarity, comfort of the furniture, and so forth will be magnified, however, by increasing density. Freedman's hypothesis makes intuitive sense and is supported by several examples which he cites.

Loo and Kennelly (1977) used data from their factorial study of social density, sex and personal space style to test Freedman's density-intensity hypothesis. They found that it helped explain some but not all of their experimental effects (chiefly those due to sex), and also referred to other density research for which Freedman's hypothesis is deficient. Their conclusion is that density intensifies or interacts with (for that is the statistical translation of the theory) only some variables, which presumably must be determined empirically.

Loo and Kennelly's discussion is particularly important here, because it is based on carefully conducted research with children as subjects, and is concerned with natural behavior and reactions to density. Their criticism suggests a final point to be made about density-intensity and a modification which may lend itself to analyzing staff/child ratio effects: that its strongest support comes from spatial density research. This point was mentioned previously, but it is perhaps significant that Loo and Kennelly's experiment (and several others which weaken Freedman's hypothesis) concern social density.

Speculating a bit, it may indeed be the case that varying spatial density (i.e., varying area available to a fixed number of people) intensifies other variables' influences on behavior. Whatever happens in the group because of its members happens more strongly, sooner, or more often the nearer the members are to one another. Varying social density is not necessarily equivalent to varying spatial density. Two possible differences are novelty and intragroup diversity. As group size increases, it takes longer to get to know each member. Furthermore, the number of ways in which the members can vary expands with increasing group size. These and other differences between social and spatial density can only serve to make the former a more complicated phenomenon than the latter.

There are many ways in which the members of a group can differ from one another, some of the more ubiquitous being personality type, cultural identity, sex, cognitive style and developmental level. One of the most extreme forms of differences in developmental level is a group composed of very young and relatively old individuals, as in a school or day care center. Because of the differential need for adult support according to developmental level, it may be advisable to analyze the effects on children's behavior of the social environment by maintaining separate variables for number of children and number of teachers (staff, caregivers, adults), rather than by using adult/child ratio. The separate variables of course would remain orthogonal to other experimental factors, such as the classification of the day care center.

There are several advantages in considering children and staff as separate factors. First, as discussed above, the diversity of types of group members is preserved, while counting both children and adults as members with equal empirical status. Second, the confounding and loss of information involved in using teacher/child ratios is avoided. Finally, a major benefit of this scheme is that the statistical interaction between children and teachers can be computed and discussed more satisfyingly than the ratio by group size interaction, since "number of children" and "number of teachers" are of the same units (namely, people).

CHAPTER FOUR: FINAL REMARKS

This review has examined an enormous body of research bearing on the impact of day care on children and their caregivers. There is another body of information, at least as large, which is relevant to the field in some less direct way. The research in this category has been referred to only occassionally here, but is discussed more fully in Williams (1977). The present review began with a look at day care as a global variable and gradually focused in on policy-related components of the day care setting. In spite of wide variability in methods and in settings studied, it has been possible to draw some conclusions, often of a highly qualified sort, about the nature and extent of the role of the day care environment in the child's development. In these final pages, a few additional comments are intended to integrate these conclusions into a larger context.

To grossly oversimplify for a moment, it can be said that the review of day care as a global variable uncovered no evidence of detrimental effects on the child's growth as a function of high quality care. The extent to which there are in fact benefits of the day care experience is at this point a highly complex question, the answer to which will only come from more careful, large scale research into the impact of component variables of the setting on those persons presently in it.

It is also quite evident that the manipulation of component variables such as group size, number of children and adults, the background characteristics of those present, and the organization of the physical and social environment can in fact make a difference in the behavior of both adults and children in the immediate setting. Whether these modifications of behavior have long-lasting, measurable effects is still a somewhat controversial question, but there is certainly strong evidence suggesting that under the right circumstances, change resulting from the day care experience does persist for long periods of time.

It is the joint task of researchers and policymakers to continue the effort to untangle and clarify the highly confounded variables which are most probably responsible for such effects. The more success achieved in this endeavor, the more important day care becomes as a means to improving the quality of the young child's present and future life. Such remarks are reminiscent of the comments first made over a hundred years ago about the potential benefits of early childhood education (Forrest, 1927). The similarity is, however, only superficial. The current situation is different because the technology exists to provide an empirical base for educational and policy decisions concerning day care.

Of course, that technology is useful only to the extent that it is properly applied to the problems at hand. This review, by focusing on manageable, policy-related variables, has tried to suggest one aspect of that application. There are other aspects, however, which are equally important and considerably more difficult to incorporate into a program of research. The two most important of these issues are the community-based intellectual and emotional climate in which the day care program must operate, and the diversity in such climates across the country.

In an earlier section of this review it was noted that the interpretation of many of the outcomes of the day care experience was a highly subjective matter. It is not reasonable to expect an entire nation of people to agree whether it is more valuable for a child to be assertive and self-confident than to be respectful of and deferential to authority. Most of the other outcome variables studied by day care researchers are likely to involve some degree of value judgment as well. In such cases it is very difficult to obtain consensus of opinion on the relative "goodness" of a particular outcome. It follows that the expectations and values of teachers and other staff in the day care setting, as well as those of parents and the future teachers of the child, will function as powerful modifiers of any effects produced in the day care center.

These variables are not, of course, manageable at the public policy level, and in fact an argument could be made that they should not be manipulated even if it were possible to do so. The society in which American children grow up is an extremely heterogeneous one, and a diversity of socialization experiences is not only called for (Lesser, 1971), but may also be most adaptive for the society as a whole. In a rapidly changing, increasingly complex world, the availability of individuals having a wide variety of value systems, behavioral orientations and adaptive skills increases the likelihood that those changes will be successfully managed and problems effectively handled.

Thus, although it is important to understand these context variables in order to properly understand the day care experience as well as socialization generally, it should be expected that a full appreciation of the role of such variables may serve to define the appropriate boundaries of regulation rather than to clarify just what it is that those regulations should be. Information about when and what not to regulate may be as important to the future growth of children in day care as is information about how to do so when necessary.

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Case Studies of the National Day Care Study Sites: Atlanta, Detroit and Seattle

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October 1977

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CHAPTER ONE: CROSS-SITE COMPARISON

Introduction

The National Day Care Study (NDCS) was conducted in three sites--Atlanta, Detroit and Seattle. In the spring of 1977, a team of three field researchers spent a week in each city, interviewing a selection of people who held key roles in day care. On the basis of these interviews, case studies were written about day care in Atlanta, Detroit and Seattle.

The case studies presented here are intended to give the reader an idea of the millieu in which the NDCS was conducted. In each case study, local historical, demographic, regulatory and administrative factors affecting day care are presented, the way in which day care is provided for federally subsidized children is described, and issues of interest to a particular site are delineated. In addition, each case study reflects the opinions the people interviewed held on such issues as staff/child ratio and group size, staff qualifications, social and health services, and parent participation in their child's day care.

In developing these case studies, we found that, while we could easily cross-check or verify specific facts, it was far less easy to determine the degree to which our respondents' opinions were actually representative of the day care community as a whole in each site. Indeed, we found that, for the most part, the attitude held by a particular respondent could be predicted by a knowledge of that person's role--as day care provider, administrator, child development specialist and so on. In a sense, the case studies are a story of common denominators--the different stands taken on a particular issue and the groups that espoused them. Sometimes, concensus was achieved on certain issues within a site regardless of the respondents' various roles. At times a consensus emerged from all three sites on a particular issue. And, sometimes, the opinions of a particular sub-group of resondents differed strikingly within or between sites. The case studies represent a compendium of these different points of view. They are not, and were not, intended to be representative of the entire day care spectrum.

The case studies are, however, an attempt to capture the highlights of the debate over day care in three cities--its delivery, quality, clientele, and purpose. Some of our respondents' opinions have been corroborated by NDCS findings; some have been negated or modified; and for some, NDCS results have been inconclusive. However, regardless of whether these opinons are substantiated or contradicted by NDCS results, an understanding of these attitudes and of the various factors which influenced them is important, for these opinions will affect the way in which federal and state policies are actually implemented. The case studies were written in the hope of achieving just such an understanding.

Report Overview

This report is organized into four sections. Chapter 1 explains the way in which the three case studies were developed and presents a cross-site comparison summarizing the impact federal day care legislation has had in the three cities, the way in which publicly funded day care is delivered in each site, and views held by the people interviewed toward the different issues associated with day care. Chapter 1 was written by Sally Weiss. Sections 2, 3 and 4 are case studies of Atlanta, Detroit and Seattle, respectively. The Atlanta case study was written by Sally Weiss. The Detroit case study was written by M.G. Trend, and the Seattle case study was written by Sally Weiss and Wendy Ruopp.

Development of the Case Studies

In developing the case studies, the first step was to review available published material on day care in the respective sites. Next the NDCS site coordinators* provided additional written reports and insights which added to the picture of day care in their particular city. Site coordinators were also asked to identify key actors in the local day care setting and to arrange interviews with a representative selection. The number of people interviewed and the positions they held are shown in Table 1. Our respondents were assured of confidentiality and, in keeping with that assurance, neither the respondents' names nor their specific job titles are shown. A general description of the respondents' various roles is provided instead. Table 1 should serve as a reminder of the limited number of interviews collected in each site so that the reader will not mistakenly think that these case studies are based on interviews with a large number of respondents.

The team of three field researchers visited each site for a one-week period. A typical interview lasted between one and a half and two hours, during which all of the questions listed in Schedule A were asked and, depending on the position held by the respondent, questions contained in Schedules B-E were asked as well. (The Data Collection

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*Site coordinators were hired locally on the basis of their familiarity with, and expertise in, day care at each site. NDCS site coordinators were Muriel Hamilton (Atlanta) Carolyn Hawkins (Detroit) and Naomi Fujimoto (Seattle).

TABLE 1

Respondents Interviewed in the Three Sites

Positions Held by Respondents	Atlanta	Seattle	Detroit
Day Care Center Directors	5	7*	11
Day Care Advocates**	5	3	5
State and Local Political Officials	2	3	5
Regulatory Staff	5	7	4
Early Childhood Educators	5	1	3
TOTAL	22	21	27

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*Includes 3 family day care providers.

**For example, representatives of 4-C's, professional associations, day care coalitions, etc.

Guidelines containing Schedules A-E are presented in Appendix A.) Before each interview started, respondents were assured of the confidentiality of their replies and permission was asked to tape-record each session. Only two of the respondents interviewed requested that the session not be taped. Likewise, only two respondents requested that certain portions of the interviews by considered "off the record" or "background only." In general, the respondents were generous with their time and talked candidly and openly about day care in their particular city, as well as about their role in the provision of day care.

Although all but two of the interviews were taped, transcriptions were made only of those interviews in which the person having primary responsibility for writing the particular case study did not participate. For the most part, the case studies are based upon field notes taken in conjunction with the interviews, and the tapes were used to corroborate or expand those notes.

Although the case studies rely largely on the subjective impressions of the researchers sent into the field, they are buttressed by quotations taken from the interviews. These quotations have been edited to eliminate the redundancies common to all dialogues; however, they are, insofar as possible, accurate representations of the respondents' opinions. Furthermore, in accordance with our promise of confidentiality, identities of all correspondents have been masked. In those instances where a respondent's position was pertinent, a general description such as "government official" or "day care provider" has been supplied. For these respondents as well as for the others quoted, any material which could be used to identify a particular person has, as much as possible, been eliminated from the quotations used.

Impact of Federal Legislation

In recent years, the federal government has become the primary purchaser of day care for children from low-income families. Although the evolution of the federal role in day care is described in greater detail in the *Final Report of the National Day Care Study, Children at the Center*, three pieces of federal legislation have had a particular impact on day care in the NDCS sites.

Titles IV-A and IV-B of the Social Security Act. The Social Security Act Amendments of 1962 resulted in an expansion of the supply of day care services available in each city. Changes to Title IV-B authorized the funding of day care for all children in need of child welfare services regardless of their family income. An amendment to Title IV-A permitted child care to be considered as a work-related expense, the cost of which could be deducted from a parent's income before that income was used to determine the size of the grant given under the Aid to Dependent Children (AFDC) program.

Impact of Titles IV-A and B on the Three Sites. This potential influx of federal funds apparently attracted a substantial number of entrepeneurs into the day care market. Respondents in all three cities commented on the startling increase in the number of day care facilities which became available in the late '60's and attributed this increase to a response, in particular, to the availability of funds under Title IV-A. The response on the part of day care providers was not immediate--in all three cities there was a lag of approximately four or five years before the burgeoning of a variety of day care facilities become readily apparent. However, various published reports on the status and supply of day care in each of the three cities corroborate the fact that the supply of day care did indeed increase during the late 60's, and in these reports the impact of federal funding under Titles IV-A and B was cited as a contributing factor.

Although the 1962 Amendments to the Social Security Act affected and continue to affect the day care world in each of the three sites, the impact of two other federal actions was not only much more immediate and more readily documentable but also had a much greater effect on the delivery of day care to children from low-income families. These are the promulgation of the 1968 Federal Interagency Day Care Requirements (FIDCR), and the passage of Title XX of the Social Security Act in 1975.

The Federal Interagency Day Care Requirements

The 1968 FIDCR were the product of a task force consisting of representatives from the Department of Health, Education and Welfare, the Department of Labor and the Office of Economic Opportunity. Each of the agencies involved was responsible for one or more programs which included as one of their components the funding of day care services. The task force was charged with developing a set of regulations which would apply uniformly to all day care facilities serving federally subsidized children. These regulations were intended not only to protect children from harm but also to promote their development. Among other things, the 1968 FIDCR set staff/child ratios and maximum group size for children between the ages of 3 and 14, established guidelines governing staff qualifications, required the provision of social and health services, mandated parental participation in policymaking for centers serving 40 or more children, and called for an educational component in the day care program.

The 1968 FIDCR engendered a considerable degree of controversy--a controversy which focused primarily on the staff/child ratios contained in the FIDCR but to a lesser degree on several of the other components as well. Despite the contoversy, states or local administering agencies were required to certify that facilities serving federally funded children complied with the FIDCR.

Impact of FIDCR on the Three Sites. At the time the FIDCR were passed, Georgia was not involved in the provision of publicly subsidized day care so the FIDCR had little immediate impact on day care facilities in the state. In the early '70's, however, Georgia began using Title IV-A monies to provide subsidized care for children from families receiving welfare. The state required that facilities serving these children comply with a slightly amended version of the FIDCR which was drafted by HEW in 1972.

In the State of Washington, the staff/child ratios established in the '68 FIDCR were strongly protested by providers and advocates alike as being too stringent and unrealistic. The state applied for and received a waiver of the ratios for centers serving subsidized children, but did not attempt to certify that centers complied with the other FIDCR provisions.

Michigan responded to the FIDCR by establishing, in 1969, three levels of certification for centers eligible to serve federally subsidized children. Centers in existence prior to January 1, 1969 could either apply for full FIDCR certification or opt for a waiver of staff/child ratio. If they chose the latter, the maximum number of federally subsidized children served could be no more than 15% of their total enrollment, and they were reimbursed for those children at lower rates than those received by fully certified centers. Centers starting after January 1, 1969 could apply for "limited" certification; such centers were exempt from the staff/child ratio requirement and were not limited in the number of federally sponsored children they might serve, but they would be reimbursed at less than the maximum allowable rate.

Title XX Legislation

The legislaton that established Title XX of the Social Security Act in January 1975 required that facilities serving federally subsidized children under Title XX comply with a modified version of the 1968 FIDCR. The modifications (1) authorized the Secretary of HEW to establish staff/child ratios for children under the age of three; (2) made optional the inclusion of an educational component in the day care program, and (3) liberalized the staff/child ratios for school-age children. Potentially severe penalties were attached to failure to comply with the day care requirements. States using Title XX funds to pay for day care in facilities which did not comply could lose all the federal funds appropriated to them for social services under Title XX and would have to repay those funds already expended.

At the time the Title XX legislation was passed, Congress placed a moritorium on compliance with the FIDCR staff/child ratios for children under six. At the same time, states were not permitted to allow ratios in centers serving federally funded children to fall below their 1975 levels. Congress also directed the Secretary of Health, Education and Welfare to report on the appropriateness of the FIDCR. In the interim, the moritorium on staff/child ratios for children under six has been extended by various pieces of federal legislation. At the present time, new regulations are being drafted by the Office of Human Development Services.

The passage of the Title XX Amendments caused states to look again at their method of providing day care for federally subsidized children. Under Title XX, states enjoy a high degree of discretion in the way federal social service funds are used. It is up to the state, for instance, to determine how funds are allocated among the different social services; to set eligibility levels for receipt of various social services; and to decide how the social service programs would be administered.

In Georgia, Michigan and Washington, administrative changes were made to meet the Title XX requirements, changes which, depending on local circumstances, affected the eligibility levels of families served, the way in which day care to federally subsidized children was delivered and monitored, and the choices families had with regard to the type of day care their children received.

Georgia contracted with certain centers to provide subsidized day care, and children eligible for such care could be sent only to those centers already under contract. This practice differs from that used in the other two sites, where parents of children eligible for subsidized care may enroll their children in any licensed center. After the children are enrolled, the center then contracts with the state for reimbursement. Thus parents in Seattle and Detroit have a greater degree of choice in determining which center best meets their particular needs than do parents living in Atlanta.

In shifting from Title IV-A to Title XX, Georgia did not alter its eligibility levels for free day care services, while Michigan raised its eligibility levels slightly and constructed a sliding fee scale for higher income families. In contrast, Washington lowered eligibility levels and discontinued the sliding fee scale for those families whose incomes exceed the cut-off points.

Georgia continued to require that centers serving federally subsidized children comply with the FIDCR. However, when Michigan switched its day care programs from Title IV-A to Title XX, the system established in 1969 for certifying facilities was eliminated. At that time the state asked the Department of Health, Education and Welfare for clarification of the FIDCR. State officials have apparently not yet resolved their difficulties over the interpretation of the FIDCR, and no new certification system has yet been substituted for the previous categories. Washington requested and received a waiver of the FIDCR staff/child ratios; the state has not developed a procedure for determining compliance with the other provisions of the FIDCR.

Impact of Title XX on the Three Sites. Implementation of Title XX produced different results in each of the three sites. This underscores the fact that no single result can be clearly associated with Title XX itself; rather, it is the way in which states choose to administer and monitor Title XX-subsidized day care which produces a specific consequence. The distinction between what Title XX makes possible and the way in which a particular state decides to implement it is one recognized by very few. Even those persons in state government responsible for Title XX-subsidized day care programs tended to attribute problems associated with the way in which Title XX was administered within the state to problems inherent in the legislation itself. That that is not the case is supported by the different impact that Title XX has had in the NDCS sites.

Title XX has led to de facto economic segregation of children in Atlanta because of the way in which the state contracts with centers to serve subsidized children. While these centers are not prohibited from serving privately paying children, the demand for subsidized day care is so great in Atlanta that centers with Title XX contracts are almost wholly filled with subsidized children. Title XX has not, however, resulted in economic segregation of children in the other two sites.

Similarly, the different eligibility levels for day care services established in the three sites came in response to local conditions. Michigan opted to use the federal funds available to increase eligibility levels and to institute a sliding fee scale. In Washington, prior to 1975, eligibility levels had been set at lower and lower limits and parents above the cut-off points had been required to pay an ever increasing proportion of their children's day care costs. When Title XX was implemented in that state, a decision was made to lower the eligibility level for free day care still further and to eliminate the sliding fee scale entirely. Eligibility levels were not affected in Georgia.

Demographic and Philosophical Differences Among the NDCS Sites

The differences in the way in which each of the three states has chosen to implement Title XX can be explained as a response to local demographic and political situations.

Of the three sites, Atlanta had the highest proportion of female-headed families (12.4 percent), followed by Detroit (11.2 percent) and Seattle (9.3 percent).* Only Seattle was below the national average (11 percent). Among women over 16 years of age, Atlanta had the highest percentage of employed women. This difference is more pronounced among women with children under six years old--Atlanta, 48.8 percent; Seattle, 29.5 percent; and Detroit, 22.5 percent. In the nation as a whole, the percentage is 31.1 percent. Atlanta residents had the lowest mean family income ($12,160), followed by Seattle ($13,233) and Detroit ($13,532). In addition, Atlanta had the highest percentage of families falling below the poverty level.

The pattern that emerged suggested that Atlanta has a greater potential demand for subsidized day care services. That this is indeed the case in Atlanta is borne out by data analyzed in the main NDCS Cost/Effects Study. In the Atlanta centers participating in the NDCS, public funds accounted for 56 percent and parent fees for 22 percent of average monthly income. Parent fees, on the other hand, are the primary source of center income in Detroit, accounting for 76 percent of average monthly income, while public funds represented only 14 percent. In Seattle, 42 percent of center income comes from parent fees and 28 percent from public funds.

When respondents were asked about unmet day care needs in their particular cities, it was only in Atlanta that the need for all types of day care services (infant, preschool and school-age day care) appeared to exceed the supply. Centers in Atlanta (both profit and nonprofit) have long waiting lists; there is considerable public support for the establishment of a sliding fee schedule to accommodate parents whose income exceeds the cut-off for fully subsidized day care; and the Atlanta public school system offers day care programs in schools throughout the city. In Seattle, supply and demand for day care appears to be more evenly matched, although respondents cited a need for more day care for infants and school-age children. In Detroit, the supply of day care apparently exceeds the demand, and respondents noted that day care centers competed vigorously for clients by offering such extras as karate, ballet, Swahili and French and by providing transportation to and from their facilities.

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*The figures cited in this paragraph are based on 1970 census data.

Day care has been traditionally much more acceptable in the South.* Blacks have raised generations of white children while their own black children were cared for by members of their families. Compared to either Washington or Michigan, Georgia is a poor state and "*the AFDC mother has always worked.*" In contrast, there is a strong feeling on the part of many in Washington--particularly in the legislature--that mothers of young children should be encouraged to stay at home. Thus the state has viewed its participation in the provision of subsidized day care as being appropriate only as a last resort, although there is strong support in Seattle for the establishment of a sliding fee scale which would assist families whose income exceeded the eligibility limits for fully subsidized day care. Respondents in Michigan did not question the necessity of day care. They took that need as a given and turned their attention instead to the way in which day care was to be regulated. The feeling on the part of those we interviewed in Michigan seemed to be that the state regulated best where it regulated least. Respondents there argued that centers regulated only to the degree necessary to protect the health and safety of the children enrolled could provide adequate day care at a cost most parents could afford and that more stringent regulation like that contained in the FIDCR would increase costs but not quality. Furthermore, the respondents maintained that, given an atmosphere of healthy economic competition, facilities would provide on their own initiative many of the services and program components thought by some to be components of a quality day care environment.

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*For example, the NDCS Infant/Toddler Day Care Study noted that day care for children under three was more prevalent in the South: about 61 percent of children under three enrolled in day care centers are found in the Southern regions; almost 8 percent of the total day care center enrollment in the Southeast and the Southwest portion of the nation is under two years old compared with about 2 percent in northern and western states.

State Regulations

The economic and philosophical conditions peculiar to each site are reflected in the type of day care regulations promulgated by each state. Although regulations in all three states address issues such as staff qualifications, safety standards, discipline, toilet-training and so on, Georgia's regulations are so detailed that they almost constitute a "how-to-do-it" manual for setting up and running a day care center. In contrast, until recently Michigan's regulations applied to nursery schools as well as to day care centers and did not make a distinction between a nursery school which cares for children for just a few hours a day and a day care center which takes care of children for a much longer period. Washington, like Georgia, has regulations specifically for day care centers but the Washington regulations do not go into nearly as much detail.

Given the economic conditions in Georgia, it is not surprising that the Georgia regulations are quite similar to the FIDCR and that most of the federal requirements were readily accepted by providers. The FIDCR are intended to serve a low-income population--a population traditionally thought to require comprehensive social and health services. Because so high a percentage of Georgia's population falls under the classification "disadvantaged", it is not surprising to find a well-developed approach to comprehensive day care services in that state--an approach reflected in the priority given to day care in the state's Title XX plan as well as in detailed provisions of the state regulations. Day care is both essential and accepted in Georgia, and there is a good deal of community support for the state regulations. Thus, while there was opposition to the FIDCR staff/child ratios which are more stringent that the state ratios, the remaining provisions of the FIDCR were readily accepted along with the way in which the state chose to administer Title XX day care funds.

State regulations in Michigan and Washington also have a great deal of community support, as does the way in which Tite XX subsidized day care is provided in those states. Respondents in Detroit were opposed to any regulatory system which would limit the options available to parents in selecting a day care center, while respondents in Seattle were concerned that more detailed regulations would inadequately reflect the cultural diversity so celebrated there. They were also opposed in principle to regulation which interfered with individual freedom of choice. While they favored policies which would increase the access families had to a particular program, they were strongly opposed to policies which might require a certain economic or racial mixture or which might attempt to standardize program content.

Thus in both Detroit and Seattle, respondents were concerned that full enforcement of the FIDCR would have negative consequences. For example, they predicted that enforcement might lead to de facto economic segregation, either because the state would alter its method of contracting with providers or because relatively few providers would agree to accept subsidized children. They questioned also the need and the appropriateness of having centers responsible for providing social and health services: respondents in Detroit maintained that other, already existing programs could provide these services more cheaply than could day care centers; respondents in Seattle contended that it was the parent's responsibility, not the center's, to see that these needs are met.

The FIDCR are presently not being fully enforced in these two states, so it is not possible to ascertain how accurate these predictions might be. However, it is important to understand just what the local market will bear and what the community will support. Local demographic and philosophical factors not only affect the way in which day care is regulated and delivered but also affect the attitudes the community holds toward various policy issues. These attitudes--and the factors contributing to them--are summarized in the section which follows.

Respondents' Views on Policy Issues

Staff/Child Ratios. As previously noted, the most controversial regulation among the FIDCR has been the ratio requirement. As shown in Table 2, the ratios mandated by the FIDCR are more stringent than those required by Georgia, Michigan and Washington.

Table 2

Child Care Centers: Minimum Staffing Requirements by Age of Children Under State Licensing Requirements

Maximum Number of Children Per Caregivers by Age of Child

	Georgia	Michigan	Washington	FIDCR
Under 2	10	n.s.	7	4
2-3	10	10	10	4
3-4	18	10	10	5
4-5	20	12	10	7
5-6	25	20	10	7

Data was taken from 1977 Report on Child Care, Committee on Finance, U.S. Senate, Table 43 and is current as of 11/30/76.

n.s.: not specified

Most of the respondents in the three sites felt that their particular state's ratio requirements were adequate, both in terms of ensuring sufficient adult supervision for groups of children and allowing facilities to provide care at "reasonable" costs. Enforcement of the FIDCR ratios, they argued, would drive day care costs beyond the amount that privately paying parents would be either willing or able to pay and thus those centers maintaining FIDCR ratios would be filled almost entirely with subsidized children. Furthermore, they maintained, implementation of the FIDCR ratios would result in caregivers standing around and talking with each other rather than interacting with the children, or in their being quicker to call in sick since they would feel their presence was not absolutely essential.

What our respondents failed to realize was that there was a discrepancy between the ratios permitted by the state regulations and the ratios actually maintained by individual centers. While centers were permitted under state regulations to have one caregiver for every 18 three- and four-year-olds in Georgia and one caregiver for every 10 children of that age in Michigan and Washington, data from both the NDCS Supply Study and the main Cost/Effects Study show that centers actually maintain ratios at levels much closer to FIDCR ratios than to state requirements. The average actual child/staff ratio is 6.8 children per adult--very close to the average FIDCR standards (6.3 children per adult) and far below the average ceiling imposed by state licensing standards (12.5 children per adult). In the centers which participated in the NDCS main Costs/Effects Study, ratios in almost all centers fell between 1:5 and 1:10, with the average ratio being 1:7. Although a shift from the ratios actually maintained by centers to the FIDCR ratios would increase center costs, the actual cost increase would not be nearly as drastic as that forecast by our respondents.

Furthermore, the prediction that maintenance of the FIDCR ratios would lead to less attentive behavior on the part of caregivers is a prediction actually based on what happens when several caregivers are responsible for a group of children. NDCS results show that what happens with a group of 10 children and two caregivers is very different from what happens with a group of 20 children and four caregivers, even though the staff/child ratio (1:5) is the same for both groups. Thus a lot of what respondents attributed to the effect of stringent staff/child ratios is actually a group size and number of staff effect which could be avoided if group size were controlled as well as staff/child ratios.

Staff Qualifications and Training. The amount of training a caregiver should bring to the job could be deemed the second most controversial issue as far as our respondents were concerned. Some respondents felt that formal education--preferably a college education with specialization in a child-related area--was an essential caregiver qualification. Others insisted that a caregiver's ability to be warm and loving was far more important than whether or not the caregiver had a degree. They argued that an inherently warm and loving person could be trained in child development and other necessary skills but that all the education in the world could not compensate if a caregiver lacked "*a way with children.*"

The debate focuses on the content of the state regulations regarding staff qualifications rather than the FIDCR. The latter do not contain specific education or experience levels for day care staff. Instead the wording of the staffing regulation acknowledges both sides of the debate: "The persons providing direct care for children in the facility must have had training or demonstrated ability in working with children."* The establishment of minimum levels of caregiver qualifications lies in the states' bailiwick.

Georgia requires that classroom staff and directors must have evidence of recent training in the field of child care, although this training need not be in a degree program. The Georgia regulations also specify that persons under 18 years of age may not assume sole responsibility for a group of children.

Michigan regulations require that the center director have a minimum of two years study at the college level. Regulations are now being contemplated that will additionally require directors to have 12 hours in child development, child psychology and/or early childhood education.

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*1968 FIDCR, p. 10.

The Washington regulations specify that center staff must be at least 16 years of age and competent, and that the director and program supervisor must be 21 years of age or older. Program supervisors must have two years background and experience in programs serving children and must have accumulated 45 credit hours of college or other training in child development or have a plan to obtain such training. Washington recently recognized the new Child Development Associate (CDA) credential as meeting the training requirement.

In all three sites, most day care centers make determined efforts to meet the staff qualification requirement embodied in the state regulations. Centers' compliance with these regulations does not, however, mean that the debate over appropriate levels of education and experience has lessened. Only in Seattle has the controversy modified somewhat; in the other two sites the debate over education vs. 'mothering' continues.

When Washington instituted the requirement that center directors have 45 credit hours of college or some other training in child development, the day care community argued that the requirement was unrealistic "for what's out there: most women in the business don't have more than a high school degree and how can they afford to go back to school?" As specialized training became a more common part of a program director's qualifications, however, controversy over it has subsided. A caregiver's warmth and ability to work with children, however, is still viewed by respondents here as being as important as the amount of specialized training.

A factor contributing to the intensity of this particular debate in the other two sites is the interest shown by the local school system in providing day care. In Atlanta, the public school system presently runs 35 day care centers, and in Detroit private day care operators fear that the public schools may try to enter the day care market. The provision of day care by the public schools highlights the question of the purpose of day care and in so doing adds fuel to the debate.

Some members of the day care community--school officials among them--feel that the primary goal of a quality day care program should be to increase the educational achievement of the children enrolled. Thus, they argue, caregivers need professional skill in identifying early dysfunctions in a child's development and the ability to enhance children's cognitive development with a specialized curriculum.

Taking the opposite side are those who believe that the trend toward cognitive development represents a movement away from the warm, nurturing environment they feel should characterize day care. They maintain that day care is not supposed to be an educational experience per se and that the emphasis should be on providing a warm and loving environment in which the child is free to develop naturally. For them the primary purpose of day care is to provide a safe and protective place for children to be while their parents are working. Thus they view a caregiver's having a "way with children" or experience working with very young children as most important, regardless of whether or not the caregiver has educational credentials.

In Detroit the advocates of specialized early childhood training are likely to be associated either with the public school system or with programs like that run by the Merill-Palmer Institute which sponsors a CETA project whose goal is to train students specifically to work in day care centers. Operators of private day care centers can usually be counted on to advocate warmth and experience against an enforced level of professional training. Economic considerations play an important part here, since operators of proprietary centers are concerned that salaries for caregivers with specialized educational backgrounds will be high and will force proprietors to raise tuition beyond what a number of parents are willing or able to pay.

Reaction to the need for child-related specialization was somewhat different in Atlanta: specialized training is essential but a bachelor or a master's degree is not. Most providers (in both proprietary and non-profit centers) and many advocates felt strongly that you "hire heart first and train later." Specific skills can be taught, but warmth cannot. The exception came from a respondent associated with the day care centers run by the Atlanta public schools. Teachers in these particular centers are hired through the public school personnel department and as such have at least a B.A in education and most of the lead teachers (who function as directors in these centers) have a master's degree as well.

Many institutions in all three sites offer courses specifically for day care staff. In Georgia, the State Board of Education offers two basic "hands on" courses in day care training and child development. In addition, the Atlanta Area Technical School offers a two-year program for day care workers as well as a mini-course in administration for day care directors. Georgia State University has a graduate program for day care directors, and the Southern Regional Educational Board is developing a program to train interested staff in day care management. Atlanta University offers undergraduate courses in day care, and the Georgia Department of Human Resources provides workshops run by its licensing consultants for staff in day care centers.

In Seattle, the community colleges offer training in day care. Seattle Central Community College has a two-year program of day care training and five other community colleges offer day care courses as does Rentnor Vocational School. The community colleges have also sponsored workshops for day care staff and provided in-service training. Although Head Start does much of its own training, Central Community College has also conducted on-site training in some Head Start programs. The Puget Sound Association for the Education of Young Children has also been an important training force outside the educational institutions. With training so readily available in both these cities, it is not surprising that day care is seen as a profession for which both inherent ability and specialized training are necessary.

In Detroit, two-year programs are offered by Wayne State University, Wayne County Community College, Highland Park Community College, Madonna College, Mercy College, Marygrove College and Schoolcraft College. Madonna College also has a one-year program for child care aides. In addition, the Merrill-Palmer Institute trains CETA students to work in day care centers, and high schools in the sourronding areas of Oakland and Macomb counties offer some day care training in their vocational programs.

In both Atlanta and Seattle, day care was seen as a profession for which both inherent ability and specialized training are necessary, and regulations mandating some form of specialized training were supported by the day care community in those cities. In Detroit, however, there was strong oppositon to any suggestion that caregiver qualification requirements be made even slightly more stringent. The availability of trained caregivers did not appear to be a factor: although we did not collect data on the absolute numbers of students trained by the various institutions, it appeared that in all three cities there was a significant pool of trained caregivers available on which centers could draw in order to meet requirements for specialized staff. One Detroit respondent suggested that the difference in attitude stemmed from the fact that there was no pool of trained caregivers there willing to work at or below the minimum wage: jbs were available in industry although not in day care which paid a higher salary. Thus if center operators were required to hire staff with some form of "formal" training, they would have to increase their salaries.

Provision of Supplementary Services

The major question surrounding the provision of social, health and nutritional services centered on where primary responsibility for their delivery lay. No one questioned the need for serving nutritionally sound meals and snacks, and our respondents felt that state and federal nutrition regulations provided insurance against a center's cutting costs by serving inadequate meals or snacks. Controversy arose, however, over the extent to which provision of health and social services were viewed as an integral part of day care per se. While all of the center directors interviewed said that at the very least they made referrals to existing community services, the degree to which such services were provided directly varied greatly.

The FIDCR stipulate that provision must be made for health and social services, and it was not surprising that Title XX centers in Atlanta, with their nearly 100 percent federally funded enrollment, should include social--and, often, health--services almost as a matter of course. However, Title XX centers run by the Atlanta public school system differed from their private counterparts in the way in which these services were delivered. In the public schools, the Director of Food Services is responsible for nutrition; health care responsibilities rest with the school nurse; and Family Service Workers rotate on a two-day-a-week basis to the different schools. Thus day care providers within the pulbic school saw the cognitive and social development of the child as their responsibility while responsibility for supplementary services belonged to persons outside the day care classroom. One respondent said that day care was in itself a service, similar to other services provided by the public schools.

Title XX centers not within the public school system were more inclined to see the direct delivery of supplementary services as an integral part of their program. In part, this is because most do not have access to a division of labor similar to that of the public school system. For the most part, however, this attitude toward social and health services stems from the way in which these private Title XX centers developed. Some of these centers are run by community organizations which espouse a holistic approach to social intervention. Others grew up in response to the federal and state funds available for child care and thus their programs are designed to meet requirements set forth for receipt of these funds--requirements which usually include the provision of supplementary services. In contrast, private parent-fee centers in Atlanta, not bound by such funding requirements, tend not to view these services as essential to their programs. Most of these parent-fee centers do make appropriate referrals for specific social services when the need is apparent or in response to a parental request. Atlanta seems to have a comprehensive social services network which is accessible to these centers and their clients, and the existence of such a network may make direct delivery of social services a less pressing issue.

Most respondents in Atlanta agreed that the existence of a comprehensive social service network enhanced the quality of day care in that community. In Seattle, however, respondents noted that there were few support services linked to day care. This may be due to demographic differences between the two cities. Atlanta has a higher proportion of low-income families than either Seattle or Detroit. The economic and industrial growth of Seattle, though, has not been accomplished without a related growth in urban poverty. Regardless of this, there is little demand for social services there. A representative of a network of centers supervised by the city of Seattle noted that when, in the past, social services had been offered to their clients, most parents were interested only in receiving job-related advice and training. They did not have the time, inclination or need for family counseling or courses in parenting skills. Furhermore, as a representative from the state department of Social and Health Services pointed out, *"Our case work staff is so low in local offices that we don't have the personnel to provide services to families."*

Given the limited availability of a comprehensive social service network combined with little demand on the part of clients for such services, it is not surpirising that social and health services are not considered to be essential components of a day care program in Seattle. Although some center directors reported that they have at times arranged appointments for medical and dental check-ups, for the most part parents are advised to make these arrangements themselves.

One director said that she did a great deal of informal counselling, noting that her parents preferred to drop into her office at the end of the day to talk and were reluctant to seek more formal help from the social service agency with which her center was affiliated.

The supply of social and health services was seen as adequate in Detroit. While some centers feel that they should at least address family counselling needs and make referrals for medical and dental services, others argue that different agencies in the community already provide these services at a much lower cost then they could. The majority of the center directors interviewed felt that their responsibility to parents and their children is limited to what happened while the children are actually on the premises.

Parent Participation

It is generally assumed that the involvement of parents in preschool activities and in later educational phases of their children's lives is good and ought to be encouraged. The form which this invovlement should take was very vigorously debated. While periodic communication between center staff and parents was universally endorsed as was parents volunteering to go on field trips or to help out in the classroom on occasion, many directors felt strongly that parents should not make policy. This was particularly true of proprietary centers. Reasons given for not wanting parents involved in substantive policymaking included parents not having a long-term, vested interest in the center and so making decisions which would affect the center negatively in the future; parents' lack of professional expertise (one director drew an analogy to having passengers running an air line); and the difficulty involved in getting already busy parents to devote the extra time required to work on a center's board. In contrast, directors of centers which espoused a holistic approach encouraged the active participation of parents in policymaking as well as in volunteering at the centers and attending workshops and social events.

In all three sites, it appeared that parents did not feel strongly about participating in center activities. Even those centers which scheduled meetings at the time when most parents arrived to pick up their children reported little success in increasing the involvement of parents in their programs. By and large, parents seemed to be content to have their participation limited to an exchange of comments with their child's treachers at arrival and departure times or to occasional volunteering in the classroom or on field trips.

In Atlanta, the private Title XX centers are making a continuing effort to encourage parental involvement--for instance, scheduling meetings at the end of the center day, serving sandwiches and providing child care and stressing the importance of parental input into their programs. In spite of this, respondents there concurred that the level of parent invovlement has been discouragingly low. A Department of Human Resources official also indicated that the Department would like to see parents more involved in center activities. From their perspective, the day care facility can not only serve the function of educating parents about what day care actually is but more importantly give them insights into child development that might lead to improved parenting. Contextually, the state regulations require that parents be admitted to a center any time that their child is present. However, they do not mandate parental participation on governing boards. Proprietary centers seem willing to encourage parent involvement only to the extent that parents do not presume to have control over the programmatic aspects of the center: it is important to have a continuing communication with parents on the progress and development of their children, to have them contribute to fund drives and to assist on field trips, but not to have them make policy.

The position that the level of parental involvement has intrinsic limits vis-a-vis day care is widely held in Seattle. Our respondents left us with the impression that "not only should no one tell you what to do" but also that there was little interest in general in participating in communities. Thus, center directors readily accept the notion that parents would prefer not to be hassled with "extra volunteerism" in day care activities. One center director said that it was unreasonable for the federal government to require parent participation on governing committees in day care centers. From her perspective, parents are most concerned that the day care facility is clean and safe and that caregivers are warm and pay attention to their children. Moreover, she pointed out, parents have no investment in the service beyond concern for their child--"they don't stick around after their kids are out of day care." This attitude toward parental involvement was reflected in the NDCS Seattle sample. Of the 16 centers studied, only three said that there were parents on the board of directors, and only one reported regular parent group meetings and strong parental interest and input.

In Detroit, there was no concensus on the form which parental involvement should take. But, whereas in Atlanta a director's attitude about parent participation could usually be linked to funding and type of enrollment or in Seattle could be seen as a reflection of a prevailing philosophical mode, directors' attitudes toward parent involvement took curious twists: Some directors of proprietary centers argued that "parents voted with their feet: if they didn't like what was happening, they took their children elsewhere; others countered that they increased their long-term enrollment by making parents fully a part of their center, that they worked hard to see that families made social and educational activities at the centers part of their way of life and that it paid off in the long run. Still other centers, similar in terms of a holistic approach to child care, differed on the merits of parental input into policy while they agree on the need for interaction between parents and staff overall.

CHAPTER TWO: ATLANTA CASE STUDY

The first day care program in Atlanta was the Sunday School Mission program. Started by United Way in 1888, it was staffed primarily by volunteers. In a sense, the Sunday School Mission program foreshadowed federally funded day care programs, both those in the 1940's and those at the present time: just as day care was provided during World War II to permit mothers to work in factories, the Sunday School Mission program was a response to the fact that mothers were needed to work in the mills during the late 1800's. Furthermore, just as federally funded day care programs today are required to provide social services both to the children they serve and to their families, the volunteers associated with the Sunday School Mission program provided a rudimentary form of social services by giving out needed food and clothing.

It was a patriotic necessity for women to work during World War II, and the Lanham Act, passed in 1942, authorized federal funding for day care. In Atlanta as elsewhere throughout the United States, day care centers were started so that parents could work during the emergency, although care in Lanham Act centers was provided for only 105,000 children across the nation.* After the War ended, federal funding for day care was withdrawn but the need for day care continued. A song popular during World War I asked, "How are you gonna keep them down on the farm after they've seen Paree?" After World War II, not only

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*Steiner, Gilbert Y., The Children's Cause (1976), p. 17.

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did the "boys" not come back to the farm, but not all of the women came back from the factory. Parents' needs for day care were met, in Atlanta, by centers funded by United Way. In addition, a number of "Mom and Pop" businesses--both small centers and family day care homes*--were started.

One respondent, whose involvement with day care began as a student worker for the Works Progress Administration, said that the families whose children were in federally funded day care programs during the War represented a broader income spectrum than that of parents using federally funded centers in Atlanta today. She noted that United Way centers primarily served single parents or low-income families:

> *Folks needed to work even when the War was over. In fact, the mother receiving AFDC (Aid for Dependent Children) money has always worked in the South. The day care in these United Way centers was subsidized, with the fee being determined on a case-by-case basis. The other day care--the 'Mom and Pop' businesses--also had a sort of sliding fee scale for their families. They really didn't make a decent living from day care because they would be buying kids shoes or whatever from the money they took in. The day care subsidy has always been here in Atlanta but maybe not in the normal sense.*

For a long time, the Sheltering Arms Day Care Association and the Gate City Day Care Association were the only agencies offering day care programs in Atlanta other than the ones offered by the "Mom and Pop" businesses. During the 1960's, however, several pieces of federal legislation were passed that had an impact on day care--in Atlanta as well as in other parts of the country.

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*A family day care home (FDCH) is a private home in which care is provided for part of the day for children who are not residents of that home.

The 1962 Amendments to the Social Security Act authorized funding for day care under the Child Welfare Services (Title IV-B) program. These monies were available to all children in need, regardless of their families' income--and, in Title IV-A, specifically authorized child care as an additional expense in determining the AFDC needs standard for mothers who were either in job-training or employed. In addition, some resources for child care were provided from the funding for Headstart programs in 1965, the Work Incentive program (WIN) in 1967, and the Model Cities program in 1968. Also in 1968, a program to coordinate all federally supported child care was initiated. This program--Community Coordinated Child Care (4-C's)--was intended to coordinate child care programs locally, regionally and federally. However, 4-C's had no Congressional mandate, and its funding had to be taken from Headstart appropriations. Therefore, 4-C's "lacked the critical ingredient of community action: relatively free money to support community-designed programs",* and its effectiveness and impact on day care varied from community to community.

Initially, these federal programs had a modest impact on day care in Atlanta: "*Georgia was very slow in taking advantage of Title IV-A. When Atlanta's 4-C's program started in 1969, there was not much to do since there was no IV-A money being used here. 4-C's was limited in funds and wasn't able to accomplish much. Gradually, however, it took on four roles: (1) purchasing care from private centers (using money channeled through United Way); (2) providing training for staff in all centers using IV-A funds; (3) providing technical assistance to centers requesting it;* and *(4) planning for*

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*Steiner, Gilbert Y., The Children's Cause (1976), p. 49.

day care and providing information and referral services."

Although Title IV-B provided some federal money for the purchase of day care for children without regard to family income, funds for Title IV-A were tied to the income level of the recipients. Centers receiving Title IV-A funds primarily served children from low-income families. Furthermore, in 1972, Congress imposed a ceiling on federal funds for social services which meant that states whose funding was either close to or at their allocated ceilings were often unable to expand their funding for day care services sufficiently to meet the need for care, particularly the need of families whose income level slightly exceeded the requirements for fully funded day care. This segregation along economic lines was disturbing to some: *"A strict separation between free care and expensive care in not good for anybody! There are families who really need care that aren't getting it."*

Centers run by the Gate City Day Care Association were among those receiving Title IV-A monies. However, early in 1975, Gate City discontinued its funding from Title IV-A because they did not like the guidelines on eligibility and program content. Other centers continued to receive Title IV-A funds and, later in 1975 when Title IV-A was replaced by Title XX of the Social Security Act*, received Title XX funding for their programs. These centers were required to comply with the 1968 Federal Interagency Day Care Requirements (FIDCR) which set standards for such things as the number of children per adult caregiver, group size, staff qualifications, health, nutrition and social services and parent involvement. Centers not receiving federal funds did not need to comply with the FIDCR. However, all centers in Georgia must comply with the Minimum Requirements for Day Care Centers established by the Georgia Department of Human Resources (DHR).

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*Title XX of the Social Security Act was passed by Congress in the Fall of 1974 but was not signed into law until January 4, 1975.

The availability of federal funds for day care encouraged, albeit slowly, an increase in the amount of day care available in Atlanta: "*In 1968, the Model Cities money came, bringing with it some day care resources. Then 4-C's came, and the IV-A, and the world of day care expanded.*"

Among those responding with proposals for the use of Title IV-A monies was the State Board of Education. As one respondent explained, "*1971 really marked the beginning of Title IV-A in Georgia. Approximately 19 proposals were written which would use the schools to provide a broad base of Title IV-A programs -- programs serving parents or serving school age kids as well as programs providing day care for preschool children. But before most of these programs could be operable, the cut in federal funds came in 1972, and the only proposal funded was for day care. At first there were 39 day care centers in the schools; now they are down to 35.*"

The centers run by the school system differ somewhat from other nonprofit centers and from proprietary centers. These differences are primarily related to the way in which the school system centers are organized. In both the non-school non-profit centers and the proprietary centers, there is a single day care director. The director is responsible for seeing that the policies of the center are carried out, for directing the work of the teachers and aides, and for the day-to-day business required to run a center. In the case of proprietary centers, the policies implemented by the director are set by the center owner. Generally, in the non-profit centers, policymaking is the responsibility of the governing board which, if the center receives federal funds and serves more than 40 children, must include "not less than 50 percent parents or parent representatives selected by the parents themselves in a democratic fashion."*

There is a single school-wide director for all the public school day care centers in Atlanta, but her responsibilities are centered on coordination and not on policymaking. Decisions concerning such things as curriculum, program or in-service training for each day care center within a public school are made by those responsible for similar policies for the school: curriculum is developed by the Director of Curriculum for the elementary grades; workshops are planned and run by the school's Resource Teachers; teachers are hired through the school Department of Personnel; and materials are supplied by the school system. In these day care centers, the school principal takes the place of a director and the caregivers are "*teachers who happen to be doing day care.*" One person associated with the public school centers explained, "*Planners--people who were already in the system--worked with the community, listed their priorities, found out what each principal would support and what space was available. The teachers were screened, and we got the best they had. Thirty-three now have their masters degrees.*"

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*Federal Interagency Day Care Requirements (1968), p. 14.

Reactions to the public school system as a provider of day care are mixed. To one city official, the involvement of the school system in day care was a logical next step: "*We were trying to get as many services to kids as we possibly could. We found that there existed in Atlanta resources, buildings and teachers that could be used for child care. The federal guidelines allow the use of in-kind contributions -- use of buildings and so on -- as part of the local match for federal funds, so the schools weren't risking any money of their own. In addition, they were providing jobs for teachers they could not take into their own system but felt good enough about to want to use somewhere.*" There was, naturally, some resentment toward the school system from the proprietors of for-profit day care centers:

> *In some areas, centers were put out of business; they couldn't compete with free day care down the street.*
>
> *Some people feel that in the public school they were not made to keep up with the same standards that private child care centers have to.*

Still others felt that teachers trained to teach in the primary grades could not, and did not, differentiate day care from formal schooling: "*The teachers weren't necessarily certified in early childhood education. They did well but tended to let the three-year-olds go home with their seven-year-old siblings at 3:00. There's no point in sending them out on the street at 3:00! Elementary school teachers are not used to the child-rearing total environment. And, furthermore, the public school system is having real problems with the cost of these teachers.*"

Personnel costs are the single largest expense a center incurs; in the Atlanta centers studied for the National Day Care

Study, the average monthly expense for personnel was $7,340--77 percent of total average expenses.* Personnel expenses are a particularly acute problem for the public school centers because, since the day care teachers are part of the school system, the centers must meet the 7 percent cost-of-living raise plus the step increases of 11 percent given to the other teachers within the system. *"This is a real problem because salaries are paid from Title XX monies, and the Title XX funds stay the same every year while the salaries go up."*

The advent of federal funding for day care has made possible an increase in day care services available in Atlanta. However, as the next section will show, it has also had a part in fostering the existence of a day care system which is divided along economic lines.

Day Care Funding: He Who Pays the Piper Calls the Tune

Day care in Atlanta is essentially divided into a two-track system: there is day care for which the government pays, and there is day care for which the parent pays. Although day care centers and family day care homes--as well as an assortment of informal day care arrangements such as babysitters--are all available in Atlanta, parents in need of financial assistance have fewer options regarding the type of care they use than do parents who pay for day care on their own. To be sure, privately paying parents are not free from all external constraints on their choice of care: the care they most prefer may not be conveniently located, have space for their child, or be available at a price they can afford, but these parents at least have the option of exercising some control over the type of care they use. In Georgia, parental choice in determining whether a child receives care in a center, a family day care home or in his own home is much more limited when the government picks up the tab than it is in either Michigan or Washington. Parents eligible for government subsidy in Detroit and Seattle place their children in centers or family day care homes, and the facilities then bill the state for the children's care. Georgia, however, has contracts with certain day care centers and family day care homes for the provision of care to children from families eligible for government programs, and parents eligible for Title XX programs may send their children only to facilities under contract to the Georgia Department of Human Resources. Parents participating in Work Incentive (WIN) programs have a bit more leeway than do parents eligible for Title XX services: WIN monies may be used to pay for in-home babysitting and for care by a relative as well as for care in a family day care home. Although the question of who is paying does not necessarily affect the quality of care a child receives, the existence of this de facto two-track system in Atlanta has an impact on a host of issues associated with day care there, and an understanding of this system is necessary to an appreciation of day care in Atlanta.

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*Travers, et al., National Day Care Study Second Annual Report: Phase II Results and Phase III Design (Cambridge, MA: 1977), p. 61.

Contracted Care

Virtually all contracted care is care in a day care center rather than in a family day care home. Day care for Title XX eligible children in Atlanta is provided by private nonprofit centers and 35 public centers; proprietary centers are not under contract to DHR. Public centers are run by the Atlanta Public School System and are located within the schools. Private, nonprofit centers are sponsored by churches, community centers, United Way and similar organizations, and by the city of Atlanta and Fulton County.

The money to pay for this contracted care comes from a combination of federal, state and local funds. Seventy-five percent of the funding for Title XX programs is supplied by the federal government with state and local sources providing a 25% match. In 1971, when federal funds were provided under Title IV-A, DHR (then known as the Department of Welfare) was unable to get additional state money for support of child care services. As a way of expanding the services they could support, the Department asked local grantees to supply a part of the match. Title IV-A was replaced by Title XX in 1975. At the present time, DHR supplies 12.5% of total program funding for Title XX child care programs and local grantees provide the additional 12.5% of the match.

Local match is provided through a variety of mechanisms. The local match for the 35 public Title XX centers is provided through in-kind services from the school system, with the bulk of the federal and state monies going to pay the salaries of the day care teachers.

The private, nonprofit Title XX centers must find local matching funds on their own. Sixteen Title XX centers are under contract to the Atlanta Bureau of Human Services. For those centers, the local match is provided by the state, the city and Fulton County, with one third of the monies being supplied by each. United Way supports some Title XX centers, including three centers in a "chain" run by the Sheltering Arms Day Care Association. Churches also support Title XX centers--some located in churches and some located elsewhere. Centers also apply for grants from charitable organizations and from businesses. Although theoretically fund raising may be the responsibility of the governing board, in many cases it becomes the responsibility of an already-beleaguered director. One center director described, rather poignantly, the problems she encountered in soliciting funds for her racially well-integrated center: *"Some whites don't want to give us money because we're too black. Black organizations won't give us money because they say that by having white kids here we are taking away slots that black kids need. And businesses won't give us money because we aren't black enough to qualify for some category they have...We've got to get people away from looking at black or white and just look at poor. Are they going to help poor people, or aren't they?"*

Reimbursement Mechanism

The mechanism by which the federal and state monies are disbursed to individual centers is reimbursement. Centers under contract to DHR are not paid a specific amount each month for the children in their care. Instead, they must submit bills each month for the actual expenses they incurred. It may be administratively efficient on the state level to contract with centers to provide Title XX child care. However, as a DHR representative explains, on the provider level, "*it's nightmare city. First, they don't reimburse all actual expenditures, and it has never been clear what you do with unallowable expenditures. Then, too, folks have to do the eligibility forms -- a very complicated form -- and that's re-determined every six months. The field reps keep trying to interface between the provider and DHR and the Feds or whatever, but it's insanity; it's very complicated.... Accountability is fine, but so very little is measured by what happens to kids and so much by what records are kept. People who should be spending time with kids have to do paperwork.*"

Reimbursement poses problems for providers that go beyond simply keeping accurate records. First, there is confusion at times about what is or is not a reimbursable expense, and the director must often delay making a necessary purchase until this issue has been clarified. Then, too, bills can only be submitted on a monthly basis. Even though bills are processed quickly, centers must have at least one month's money in hand in order to operate. For instance, one center was unable to buy more chairs for its children. Chairs are clearly reimbursable expenses, but the center had to buy the chairs before it could be reimbursed and the money simply wasn't there. For this and similar reasons, DHR representatives recommend that new centers have at least six months' working capital in hand before they open their doors. Finally, the reimbursement mechanism coupled with various state regulations creates a "Catch 22" situation. For example, doors are a reimbursable expense. Indeed, fire doors are not only reimbursable but required under the Georgia Life Safety Code. One center purchased, and was reimbursed for, such a door. The center, however, could not hang the door, because of a regulation forbidding the use of state monies to make permanent changes in a facility. *"When federal money comes in, it becomes state money. That door now belongs to the State of Georgia and it might be left behind if the center were to close or move."* Six months later, the door was still unhung.

Re-determination of eligibility every six months also creates problems other than paperwork for Title XX providers. The center must determine eligibility, prepare ineligible children for leaving the center, and help the parents find other day care that they can afford. This procedure affects the continuity of care for the children whose families are no longer eligible. Providers have no trouble replacing the children but they are concerned about the children who leave, as well as with the integration of new children into an already existing group. All the regulations, fee schedules and guidelines, in the end, devolve onto center personnel, and providers feel that they are out there all alone. *"Most of the people who are providers are folks who care a whole helluva lot about kids -- it's not for the salaries, that's for sure. 'They' have really exploited the commitment of these people. Providers have done a lot of exciting things in day care in Atlanta and Georgia, but it has been hard to do."*

Quality of Day Care in Atlanta

Quality apparently is in the eye of the beholder: what is good care to some is only fair care to others. We asked a variety of respondents to assess the quality of day care available in Atlanta and were unable to get what we feel to be an overall assessment. How someone assessed the quality of care available depended very much upon where that person stood within the day care community:

> A child care advocate-- *"Some of the best and worst day care in the state is here in Atlanta. It's not a question of fees. You can't tell the quality of a program by what it costs."*
>
> A professor of child development-- *"Centers are more custodial than anything else in Atlanta -- one is even run by someone with only a high school degree. Private centers have very good programs. Federally funded centers are only fairly decent."*
>
> A regional child care consultant-- *"We have better Title XX day care here in Atlanta than in Detroit.... The availability of two-year-trained Area Technical persons has been a real factor. Although they come in at an entry-level salary, they come in with training and they are a lot better than the entry-level person off the street."*
>
> Another child development professor-- *"I'm in my Ivory Tower here, but I held a meeting for trainers recently and they said that if they had kids, they wouldn't put them into the centers where they are doing the training."*
>
> A city administrator-- *"I think the overall quality of day care services is 'fair'....Let me put that in proper perspective because I think that, looking at day care across the country which is also 'fair', in Atlanta 'fair' is probably a little better than most similar communities."*

As in most cities, there is no single organization or advocacy group with a perspective on day care in the city as a whole. The Georgia Association for the Education of Young Children, an affiliate of the National Association for the Education of Young Children, represents the private sector. The Title XX Directors Association represents most Title XX centers but is stronger on the state level than in the city. (It was because of this that one city Title XX director joined. Because the directors of Title XX centers outside Atlanta ran either primarily white centers or centers that were at least 50-50 black/white, she felt that the Association would be better able to get support from state legislators who were uninterested in supporting day care in Atlanta because it predominantly served black children and/or didn't bring funds into the communities of their constituents.) The Day Care Consortium is made up of the centers under contract to the city Bureau of Human Services and lobbies for this group. The Child Advocacy Coalition, a semi-autonomous arm of the Council for Children, is mainly concerned with 24-hour child care (i.e., foster care), although it was also interested in the Day Care Task Force which worked on the most recent state standards.

One program--the Community Coordinated Child Care (4-C's)--might have provided the vehicle for focusing these diffuse interests into a common cause, but 4-C's never developed into a strong force in day care in Atlanta. One respondent attributed failure of 4-C's to develop into a viable organization to personality conflicts among key people in Atlanta as well as to the political in-fighting of various interest groups: "*When you split off* (and she named three people), *the city councils, Atlanta University, and are unable to pull in the private sector, then you become very suspect. The 4-C's just couldn't move and ended up fighting for its own survival's sake. That's not good....Atlanta is a very incestuous city.*" Be that as it may, the fact is that 4-C's lost all of its funding except for Model Cities money and "*then had to serve Model Cities programs. It never developed as a coordinating agency, but got into the delivery of services. It also never made any real effort to get the parents out: the meetings were always held at noon in the center of the city.*" Atlanta's Bureau of Human

Services picked up the funding for 4-C's for a while, primarily because it valued its information and referral services as well as its work in training and technical assistance. Although the Bureau is trying to find funding to pay a former 4-C's information specialist to work part-time in referral to available day care services, at the present time 4-C's is defunct.

4-C's function as a referral service is sorely missed. When asked what information and referral services are available to help parents find day care for their children, many respondents replied, *"4-C's used to do this...."* Although the state Department of Human Resources maintains a toll free phone number--"Tie-line"--that consumers can call for referral to all social services, there is presently no referral service specifically for child care. DHR gets calls from consumers seeking day care, as does the city Bureau of Human Services. Title XX centers are frequently advertised in community newsletters and often place pamphlets describing their centers in supermarkets, churches, and so on. Referral to private proprietary centers comes mainly through advertising and listings in the yellow pages of the phone book. Word-of-mouth is, however, the primary way in which parents are referred to day care providers: *"We've got a darned good grapevine!"*

Value or Goal of Child Care

When we asked respondents about the primary value or goal of child care in Atlanta, the matter-of-fact response was, not surprisingly, that children are in day care because their parents work:

> *Day care is 100% work-related here.*
>
> *. . . to facilitate work and increase family income and to provide job opportunities in day care for parents.*
>
> *It's first and foremost a place for the child to be while the mother goes to work.*

In all but one case, the response was the same, whether the respondent was a city or state official, a Title XX center director or the proprietor of a private center. The one exception--a city official--responded to this question by saying that the primary value of day care was to benefit children. When we asked about the goal of parent employment, the respondent replied: "*I use that when it is necessary. To be honest with you, that is not as important an objective to me. Of course, I share it--we see it as necessary--it affords the mother an opportunity to work....What it really does is afford an opportunity for a different kind of work, but you know, that doesn't get you any popularity.*"

We also asked respondents what they saw as their own primary value or goal for day care. The responses emphasized caring for children, providing a substitute family situation, and working with the developmental aspects of child raising, rather than just providing child care so parents can work.

> "*Although letting the mother work stands out as a day care goal, the development of the child concerns me more*"--A center director.
>
> "*In no way are we trying to take the place of the parent. It's good for the mother to be able to get out and better herself through school or training or work and so help to improve the community*"--A second center director.

> *"I've been pushing for day care to be used as a protective service to preclude removing the child into a foster home ...Day care should be viewed as a child-rearing place and setting. Funding should stress the family-support role rather than the replacement of family"*--A child care advocate.

Quality Care: The Great Debate

While the people we interviewed had definite opinions about which factors affect the quality of care a child receives, the major determinants of quality care were harder to identify.

> *I'm not sure how to answer that! There are so many things--any one of which would not be a major determinant but taken together would be a factor: child adjustment, parent consideration, level to which support services are available. I'd have to look at these and other factors and weigh to what extent they exist in a given program."*

> *I am very uncomfortable with trying to define quality. You really need an operational definition of day care as a process that ought to have an output. A service that produces total well-being of children--healthy children with age-appropriate skills--that's quality. It also has something to do with how parents function as a result of their exposure to day care. It ought to strengthen and support families and have kids who feel good about themselves and are fat and sassy. We need to get away from the discomfort of talking about care. Child development is fine, but 'taking care' is a pretty good thing to be doing.*

> *You can almost sense it. It has something to do with the appearance of the center--not too neat and tidy and frighteningly organized but with a sense and feeling of order . . . children's art--individualized art--on the walls; laughter and smiling and fun . . . equipment available and ready to be used by kids . . . good interaction between teachers and kids. The state standards provide for all the elements, but you can have all the component parts and still not have quality day care.*

> *Ideally, you should decide what each child in a family needs in day care and make a judgement about how much staff you need and how big a group the child can be in. You can't have that kind of flexibility in a massive*

> *program; it just can't be managed. The kind of person is more important than how many you have, but how do you measure that objectively? You have to have a planned program designed to teach kids how to learn, happily. Standards won't guarantee any of this.*

Programs geared to the developmental level of a child, programs emphasizing education, programs which treated the family as a whole--all were proposed as definitions of "quality care". Two points of consensus emerged from the responses, however: there is no single definition of "quality" care, and the regulations can't ensure its existence. One state official, perhaps wisely, declined to take part in the debate over what consitutes quality care. He did, however, say he preferred an A, B, C voucher system which would reflect the differences that exist in types of programs and which would permit the licensing department to upgrade centers programmatically, with only those centers rated A permitted to receive Title XX monies.

Factors Affecting the Quality of Care a Child Receives

We asked respondents to tell us what factors--other than those easily measured, such as group size or staff/child ratios--might have an impact on the quality of a child's experience while in day care. Although the responses to some extent reflected the respondent's particular orientation (whether a child development specialist or the director of a proprietary day care enter, for example), we found a consensus which ran across special interest lines.

Staff Characteristics

The characteristics of the director were considered a major factor in determining whether the program was good or bad. Respondents were concerned with how the director functioned day-to-day rather than education attained or experience in day care:

> *The director really sets the whole tone of the center.*
>
> *The director's characteristics are an extremely strong factor. She should be a creative, open person who can involve the staff in decision-making.*
>
> *The classroom environment is very important, but the provider's interactions are still more important. The provider has to be involved in the process of analyzing the classroom environment; all other factors are only as important as they are actually used in the classroom. They have minimal importance otherwise.*
>
> *A director must have a feel for the community, be flexible enough to work with people of all walks of life, help in getting monies, work with people who can help the community, and select staff.*

That such a director must be a jack-of-all-trades was readily acknowledged but also expressed was the belief that such directors are made, not born: "*A director starts out and finds herself great with a group of four-year-olds. Then she comes up through the ranks and finds herself needing management skills, where before the skills needed have been non-directive and peace-loving. There is no training for directors in management and political skills, for how to handle tight funding, or how to work with a board.*" One director who came up through the ranks talked about her needs: "*There are courses telling me how to teach kids, but there are no courses to tell me how to run a program. I spend so much time up here with* *the paperwork. I even took an accounting course to see if it would help me -- and it did -- but I still spend more time checking to see if the next day's menu meets the USDA requirements, or going out and buying the food, and I'd rather be downstairs having lunch with the kids today."*

Courses in day care administration and management are available in Georgia. Georgia State offers training specifically for directors in their Masters Program and the Atlanta Area Technical schools offer a short course in administration for directors. These courses, however, may not meet the needs of a director who has come up through the ranks and feels that she does not need a Masters Degree but does need more extensive training than is offered in the Atlanta Technical School's course. A current project of the Southern Regional Education Board is to set up training for day care management--*"It's a hard thing to teach, and the overall affective atmosphere is difficult, but it can be done."*

The respondents agreed that staff characteristics have a significant impact on what happens to the children. Once again, emphasis was placed on what the staff actually did within the classroom rather than on education or on years of experience in day care. One respondent, scanning a list of suggested factors, exclaimed, *"You don't have any teacher behavior here! My Number One characteristic! You need a combination of teacher-directed and child-directed activities, and then I watch to see what the adult is doing. Are they greeting the kids, or cooking breakfast? Is the adult talking to other adults,* *or getting down on the floor talking to kids? Is the adult observing, or talking with the child about what the child is experiencing? Is the adult a positive, physical person--hugging, affectionate--that gives important kinds of feedback for the child?"* Other respondents phrased it differently but agreed in essence that adult/child interactions had a greater impact on the quality of a child's experience than did such things as elaborate equipment or physical environment. An ancillary concern was staff/child ratios, including those required by the state as well as those required by the Federal Interagency Day Care Requirements (FIDCR). Although providers had problems with a high staff/child ratio with regard to its impact on the salaries they could pay their staff and the caliber of staff they were thus able to attract and retain, they were more concerned about the effect too high a staff/child ratio had on adult/child interactions. Providers observed that when too many adults work in a center, they either tend to stand around and talk to each other or else they decide, "I'm not really needed. I guess I'll just stay home today."

No one we interviewed stated a clear preference, when hiring, for either educational background or years of experience in day care. They did agree, however, that they looked at both but made their decision mainly on how someone reacted when with the children:

> *A college degree teacher will upgrade the program, but those persons we train who are barely out of high school might be better . . . . A tender, loving-care person has to want to work with children, not just work 9-to-5 and wait for payday. As they walk through, I observe whether if, when a child touches them, they jump back. If so, then they're not for us. They have to wipe dirty noses and clean dirty bottoms.*

> *One of the worst disasters we had was the best qualified. One of the best staff we had was an old lady who came in--no teeth, no good clothes--but she knew what to do with kids.*

There was concensus that observation of a prospective staff member actually dealing with the children was required in order to decide how to weigh credentials against years of experience to find the right blend of both:

> *I give a person six months to prove they want to work. We've let a lot of people go after two, three or six months. They have to have it here* (touches her heart) *and you don't learn that in school.*

If anything, there was a slight distrust of applicants with masters degrees. In fact, one director of a private center was downright suspicious of anyone with a degree: "*If you have a degree of any type, I always ask my little pet question and that is, if a child should come in with candy all over his hand, would you jump and say, 'Don't put your hand on my clothes! I'm all clean?' You can have someone with a masters degree in education who doesn't even know what a preschooler is all about. When a child regurgitates, who is going to get it? The one with the masters degree? No, she's going to wait for her aide to come . . . . It's hard to make a choice, but if you're talking about overall experience--someone who has done babysitting, has done church work, maybe has children of her own, maybe is even a grandmother and has learned from that--I would take that over education. The ideal person, of course, is an educated person with a lot of experience who would not like to do anything else in the world as much as work in child care.*"

In-service Training

In line with the theory that "you hire heart first and train later," in-service training is seen as important to the development of staff. One director requires that all staff, regardless of educational background, take Basic I and Basic II--"hands-on" courses in day care offered by the Atlanta Area Technical Schools--as well as workshops held at the center during the children's nap time. Other directors make use of workshops provided by DHR licensing representatives or use trainers from Georgia State and Atlanta University. DHR licensing representatives spend approximately 75% of their time, after a license has been granted, in technical assistance--using materials provided by DHR to work with individual facilities, teaching workshops, or helping in the courses provided by the Technical Schools. Providers are eager to upgrade their skills, and the Technical Schools are responsive to their needs. One licensing worker explained, "*Any time we can get 15 people to sign up for a class, or find an area where there are 15 people that do need a class, then* (the Technical Schools) *will actually send an instructor out to the group. They charge a $5 registration fee* (the rest of the cost comes out of vocational education funds). *We have what we call a Basic I, and that's a 60-hour course, and then there's a Basic II which is 30 hours, and then we have Kindergarten I and II...and Infant Care...one in administration; then there'd be some art and music activities. We've even had a homemade equipment course -- how do you use boxes and so on. All of them are about 24 hours. We just finished one course, and we had 20 women there every night -- one night a week for two hours each night -- and they asked for more. They really want to learn.*"

One respondent who had worked in various day care centers had this caution, however, about in-service training: "*In-service is good, but gets overplayed. Teachers have heard it all already.*

It should focus on implementation, rather than going over stuff they already know. They may just come for the handouts." This caution is echoed by a child development expert: *"Before in-service training is begun, you must do some intensive needs assessment. Then you build in systematic, ongoing in-service training, based upon what you have observed about the staff. When I do a workshop, I tell the people there, 'I hope you didn't come here just looking for handouts. We're going to work together, and then you can go home and make your own handouts from what you've learned here.'"*

Program

The emphasis many providers place on adult/child interaction, plus their view of the purpose of day care and the nurturing role they play in it, naturally affects the type of program they prefer:

> *Day care should be human service/child-centered in orientation as opposed to curriculum centered.*
>
> *We have an 'exposure' curriculum--not that we insist on the 1-2-3's and the A-B-C's. Title XX monies won't pay for tickets for field trips but will pay for the transportation, so we can take the kids to Stone Mountain but we can't pay for the kids to get in. Field trips are a high priority, so this policy is hampering us in our curriculum. We want kids to know about things: what a train looks like and so on. Our children will be tested with others and will be tagged as dumb--'They came up dumb'--when they are not dumb; they're just not exposed to these areas.*

The need for formal cognitive development was not ignored, but emphasis was placed on the manner in which cognitive skills were introduced to the child.

Of necessity, perhaps, directors of proprietary centers were the most sensitive to the demands by parents for more formal learning situations: *"In the last five or six years, and progressively so, people have been demanding education for their preschoolers . . . . I think TV has broadened a child's search for education. Sesame Street, alone, for instance. Without education . . . you're going to find that children are going to be bored, and all of this is working on parents. I don't mean they're putting children under pressure--you know, have them reading before first grade--but there's an education for two-year-olds, and I think more and more parents realize this and care about it."*

Directors of Title XX centers have also noticed this trend, as have licensing representatives:

> *There needs to be a blend of teacher-directed and child-directed activities.*
>
> *Materials need to be readily accessible to the children. Blocks, for instance. They're great for creative and shared play, but it's important to have the children themselves put them away. Not only do they feel that the the center belongs to them if they help keep it clean, but putting blocks away according to shape teaches them all sorts of math skills.*

> *Parents use centers because there is a lot going on in them, and they like that, and they want an educational program.*
>
> *I like the use of the sliding fee scale that we have in some programs. It enables the mother to put her child into those centers where maybe the children do have more advantages. Because if she could get some additional support to pay that center, her child could attend one just the same as someone who was making $50,000 a year, and then her children would get those opportunities. And this is what they say to us when they call. 'I want my child to get good care. I want my child to have opportunities that the other children have. But if I've got to put him over here at $12 a week, I know he's not getting much.' And we know he's not getting much . . . .*

Parent Participation

Although parents are expressing more interest in the type of program their children receive, the actual level of parental participation in day care programs is low. Feelings about the need for, and the value of, parental participation were mixed. Directors of private Title XX centers were unhappy with the lack of parental involvement. They attributed this lack to a variety of causes: turnover in children due to the high mobility of low-income families or to families becoming ineligible; parents being so bogged down in their own activities that they simply do not have the time to participate; or fear of crime making them reluctant to venture out at night.

Many efforts have been made to encourage parental involvement. For instance, one center scheduled meetings for the time when most parents arrived to pick up their children and had staff members on hand to care for the children while the parents attended, but it still didn't work. Most of the Title XX directors have felt discouraged and have resigned themselves to being available when parents dropped off or picked up their children and to making parents who stopped in at the center during the day feel very welcome. A person who had been active with 4-C's noted: *"The sophistication of parents' questions to 4-C's when it was operating steadily increased. Parents can articulate what they want in a program, but you never talk to anyone who feels good and smug about the level of parental involvement at their centers, although they may have some good stuff going."*

Some directors of proprietary centers were not interested in having parents make policy, although they welcomed their aid in going on field trips or as classroom volunteers: "[Proprietary centers] *in Georgia, on this side of town at least, do not have parent involvement. I know of six centers of this side of town that do not have PTA or any type of parent involvement. In fact, two day care centers do not want any parent involvement -- one where I worked previously, and one where I am now -- because parents come in and want to change their program, their policies and procedures. This is not fair to both sides. Policies and procedures are made by owners, but you still need parent involvement for other things.*" This feeling was echoed by a person involved in the public Title XX centers: "*I see parent involvement as working with or having involvement with the parent. Parents go with kids on field trips or help in the center, but the advisory committees don't make policy.*"

One Department of Human Resources spokesman feels that providers are becoming more interested in having parents participate in center activities--in part because there is a general interest in having parents learn what day care really is and in part because day care providers themselves have learned the value of having parents working with them. The DHR regulations require that parents be admitted to a center "any time their child is present;" indeed, a sign to this effect is given to providers along with the regulations. The Department is very much concerned about parents who simply call up a center, ask if there is a vacancy, put the child on a bus provided by the center and never visit the facility at all. The Department is also interested in educating parents about what to look for in choosing a day care program and in expanding the role of parents in a center's program. However, DHR prefers to work toward these goals through education rather than through regulation. For example, the Minimum Requirements for Day Care Centers do not mandate parental participation on governing boards.

Social and Health Services

Title XX centers run by the public school system march to a different drummer than their counterparts in private Title XX programs. While people involved exclusively with day care--be they early childhood development specialists or directors of day care centers not attached to the school system--see day care as a way of nurturing the whole child, people associated with the day care centers within the public schools do not differentiate between what a child experiences in the day care room from what a child experiences in, say, the kindergarten room; the children are younger, that is all. For them "quality day care" means "quality education".

For this reason, the delivery of social and health services is not of paramount importance to the public school day care teachers; they do not see family counseling or nutritious meals as their primary responsibility. Nutrition is the bailiwick of the Director of Food Service or of the Coordinators of Food Services in the different schools. The school system has Family Service Workers who spend two days a week in the different schools; social services are their responsibility. The Fulton County

Health Department will come in occasionally and do check-ups, but the schools prefer to try to help parents see that it is their own responsibility to look after the health of their children. Family Service Workers or the school nurse will, however, take the children to the Fulton County Health Department if it is necessary. One person summed up the attitude toward social and health services as components of day care by saying, "*We couldn't have day care without these services but just having day care in the school* ***is*** *a social service.*"

This feeling that health and social services are not a primary responsibility of the day care staff is shared by the directors of proprietary day care centers. They feel that they are responsible for what happens to the child while at the center but that overall health and nutrition and the seeking of social services are the parents' job, not the center's. They will, however, make referrals to appropriate services if they feel that there is a need or if a parent asks for help.

Private Title XX center directors, on the other hand, consider the delivery of social services to be an integral part of quality day care. The director of one private Title XX "chain" sponsored by a community center explains, "*We have one social worker for all five centers, but we also have some CETA* workers who are able to make home visits at night. I utilize my supervisors for in-take, and I insist that my staff make three home visits a year* (in addition to the monthly and quarterly group meetings with the parents). *We have a really big social service unit by the way I am using my staff. I don't know how other*

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*Comprehensive Employment Training Act

programs are run, but I insist on this: staff must document home meetings; social work is on the travel sheet."

The social service component of day care is also stressed by day care advocates and early childhood development specialists:

> *Good day care becomes quality because of parental involvement and additional time and support for families. Title XX is very important -- families need the guidance counseling.*
>
> *I am involved in training caregivers to see themselves as a resource for parents. Caregivers are good for developing a positive self-image for kids but they really need to work for that in the parents -- to see them as the clients, too, and not just have communication around the negative things.*

Facilities

When discussing factors affecting the quality of care a child receives, little emphasis was placed on the physicial condition of the center or on the type or condition of its equipment. What references there were to facilities came tangentially when our respondents were talking about other factors, e.g., *"The facility should be safe, of course, but the state standards take care of this."* Our respondents were much more concerned about what actually happens with the children--whether adults interacted with them, what and how they learned, whether equipment was readily accessible and being used--than they were about types of materials or the size of the rooms.

Overview

The importance given to each of the three broad categories--facilities and equipment, staff and programs, or parental involvement and support services--appeared to be linked to whether the respondent was associated with a proprietary center, a private Title XX or public Title XX center. Two directors of proprietary centers agreed that staff and program came first:

> *The reason I put staff instead of families first is because we have to offer the parents something. Some children and grandchildren have come through the center and I think this has been not because I know them so much but because of what is offered. I think parents see it that way; they have to see it that way.*
>
> *You can have a perfectly beautiful school without the right staff and center program and, you know, a parent could be taken in by the looks of the school. But if they care, they're soon going to find out the differences through their child or just through observation. And you could have a good staff and a marvelous center program in a building that doesn't compare with a new gorgeous school, but it's still a very satisfactory job they're doing.*

Private Title XX directors maintained that all three categories were important--"*all three goals are on the same line for me, all equally important*"--and the comprehensive programs offered by these Title XX centers reflect the equal emphasis each category receives. This equality of emphasis was also reflected when the directors of private Title XX centers described the characteristics directors and staff needed in order to provide quality day care despite limited funds, and how they used in-service training

(*"I've run workshops from child development to science programs to motor control"*) and use their staff to ensure that all three components are provided in their programs.

A respondent associated with the public Title XX centers said flatly, *"educational component; educational activities are number one. The physical environment is governed by the regs..."* and added, when discussing the problem of funding, *"teachers are one of the stronger points of our program. The teachers were screened and we got the best they had. Thirty-three of them, now, have their masters degrees."* The high caliber of teachers was seen as being synonymous with the quality of the program; indeed, for these centers, it appeared that without professionally trained educators there could be no day care program: *"Salaries keep going up and we have to look very seriously at our costs.... Do we downgrade staff or discontinue the business? We don't want to get out of the day care business...but we still must meet the 7 percent cost-of-living raise, plus step increases of 11 percent."*

Impact of State and Federal Regulations

State Regulations

Although respondents differed on what constitutes quality day care and which factors most affected the quality of care a child experiences, they agreed that the state regulations ensured at least a minimal level of acceptable quality and that the regulations are supported by people concerned with day care provided by centers. We did not interview parents of children in day care, so we have no way of determining whether they rely on a center's being licensed as assurance of a safe and suitable environment for their children. However, because the method by which the standards were developed and are updated requires a great deal of community input and publicity, it is possible that parents choosing a center assume that it meets the state standards and so is at least minimally safe much in the same way that restaurant patrons assume that state regulations ensure a sanitary kitchen.

Parents apparently feel free to call DHR to complain about the care their child receives or to request referral to appropriate day care services. "*We would get so many calls from parents who had simply called up a day care center, asked what their price was, did they have a vacancy, and would they take their child? The day care center provided transportation, and the parents never saw the place. Then they get fed up with that program and called us to complain about the program. And we said, 'Did you visit before?'*" One parent, in fact, called DHR to request help in finding her child: "*Had a woman call us the other day. She couldn't even find the day care place where her child was supposed to have been staying--the provider had always picked the child up in the morning.... We got back in touch with her. She came up with a description of the houses in the neighborhood and we found it; it was an unlicensed facility.*" While this woman is hardly the epitome of caution, she does illustrate two of the comments we heard frequently when we asked about the state regulations: first, that consumers rely on DHR to help them with day care problems and, second, that parents' need for day care is so desperate that they will accept, almost unquestioningly, whatever is available to them. The latter was cited as one reason why the community supported the state standards: "*I just don't think that the parents are aware. They are in so big a hurry; they need day care, and this is it....but they have no choice. Although there are other day care centers around, the cost is so high, and if you want financial help in child care, you have to be on the minimum wages or something. I think the standards, if they are gone by, are great. I don't want to use the word enforced; just follow the rules, and people get ungreedy and start looking at children again.*"

In 1973, Georgia implemented a stringent Life Safety Code with which day care centers must comply effective October 1, 1977. The cost of meeting the Life Safety Code has caused some difficulties for providers. Although there seems to be no question of their complying with the Code, it is possible that providers' concern with some of the Life Safety Code requirements, which they perceive as being over-stringent, has obscured some problems they had encountered previously with state regulations, whether they were the 1974 Minimum Requirements for Day Care Centers or earlier versions. However, no one we interviewed felt that the current Requirements were unrealistic -- if anything, it was felt that they could be more stringent:

> *They got a consensus on the Georgia state regs--'These are minimum.'*
>
> *No problems with the state standards--a ground-floor base. If enforced and implemented, they ensure a fairly good program.*
>
> *As the regs stand now, they don't ensure the kind of quality I like to see in a program. There's going to have to be more sensitivity and dedication from the legislature -- meeting __needs__ and taking nothing less. Ditto with the state standards--they don't come up to __my__ standards.*

The 1974 Minimum Requirements for Day Care Centers are so specific and detailed that the 17 pages of regulations and the six pages of Appendices could constitute a how-to-do-it manual for a prospective day care director. The regulations cover 11 categories: general policies, administration, staff, records, children's programs, nutrition and food service, health and safety, equipment, building and grounds, fire safety requirements, and transportation. The Appendices offer suggestions for food and menus and for equipment and materials. Individual rules set out items such as minimum staff/child ratios; specific programs, policies and procedures for different age groups (i.e., infants, toddlers, pre-schoolers, school-age children); discipline; and length of time a child may travel between his home and the center. They also cover such things as how frequently nursery chairs must be emptied (after each use) to which foods are or are not nutritious (fruit-flavored soft drinks such as Kool-aide are not nutritious and "dispensers for these shall not be maintained for the children's use in the center;" liver, heart, kidney, quick or instant cream of wheat or enriched farina are nutritious and should be served).

Most respondents said that they were satisfied that these regulations were essential to ensure minimum standards for centers but could not account for the rationale behind so specific a set of regulations. One respondent explained that the standards were so specific because *"we have a state department that is totally sensitized to detail"* and added that it had to be this way because the State of Georgia encompasses everything from

Atlanta to backwoods Appalachia. Another said that the standards were so detailed because *"good, strong program people wrote them."*

A spokesman from DHR explained further that a lot of the rules had been written in response to specific situations. For example, rule seven under Section IX of the Requirements reads: "The children's playroom shall have outside windows which equal not less than 10 percent of the floor area in each room. Windows shall be low so that the children can see out. Fifty percent of required windows shall be operational with approved screens. All floor level windows shall have protective devices." This rule was added because of problems DHR encountered with architects who designed centers with windows either limited to a few strips of glass on either side of a door or permanently sealed. She explained that DHR felt that children ought to be able to see outside, and, furthermore, since the weather in Georgia was temperate enough to require neither heat nor air-conditioning for much of the year, it also opposed sealed windows which made it impossible to take advantage of the good climate. However, architects responded by saying, "Show me where it says this in the regs." Now, DHR can show them.

Regulations so detailed raise the question of just what constitutes a violation for which a center should be closed. Indeed, what problems people said they had with the state regulations came from perceived inequities in enforcement. These inequities were not attributed to whether one requirement was more important than another and so should be stringently enforced, as much as they were to the political climate: *"This rule is supposed to apply,* *but if you know someone, you get away with it. If you know someone, you're licensed and if you don't know them or if they don't like you, they give you a hard time. It's a problem in this sense. There are some good licensers down there, maybe two, but I know of four or five that don't need the job. They don't enforce it. It's who you know; it's not what you know.... There are some day care centers around here that are being handicapped by individuals, not the law, but by individuals."* That particular respondent was the director of a proprietary day care center, but her sentiments were echoed by a child development specialist: *"Licensing workers don't close centers that need to be closed because of the very political aspect of who the owner knows."*

There are other explanations of just why a center, apparently in violation of the regulations, is permitted to remain open. One is linked to shortages of funds and staff: *"I think you need good state licensing, and I think in some ways that they're doing their best. They don't have enough money to do a good job at the centers that are in existence, and beyond that there are day care homes all over the place that they have no way of getting to know about because they are so shorthanded. They can't get around to the existing centers, and I think that would be probably the major point."* Another is tied to a concern about what will happen to the children in the center if it is closed. The DHR people we spoke with said that they tried hard to work with providers to upgrade their programs: *"We have actually had to put directors in jail. A woman and her mother -- with 90 kids -- wouldn't meet the standards. At that time, we didn't have the law to say you have to close the center or else go to jail. Now there's a more appropriate legal route. But we don't want to penalize people -- just help kids. We have* *closed maybe a dozen centers over the years."* A day care advocate agrees: *"Nobody wants kids to burn to death, but you can get the code so strict that the center gets closed up, and the kids are in unregulated places which are even more dangerous."*

Federal Interagency Day Care Requirements (FIDCR)

Although Title XX centers must comply with the 1968 Federal Interagency Day Care Requirements, the FIDCR have had relatively little impact on day care as a whole in Atlanta: *"FIDCR is a ghost; it doesn't really exist.... We found them close to the state standards anyway, except for the staff/child ratios."* The Georgia state requirements are similar to the FIDCR, with the major differences being that the FIDCR staff/child ratios are higher than the state's and that they require the provision of social services. The private Title XX centers see the provision of social services as integral to quality care, and the public Title XX centers use non-day care personnel to deliver social services to the children and families in their centers, so this aspect of the FIDCR is not controversial. Only one respondent commented on the social service requirement, and she was supportive of the federal standards although she questioned their feasibility: *"The FIDCR are written as if people had the services and centers just needed to be nudged to provide them. But Georgia's a poor state and just doesn't have a lot of services; it varies from county to county....But the fate of the child can't be left to the state by itself."*

The FIDCR staff/child ratios, however, are an area of concern, even though they are currently under a moritorium. *"The average day care operator wouldn't know about a separate federal standard. Probably most think that it is a staff/child ratio guide. Only maybe 5 out of 20 know the whole scope of the FIDCR."* Even those who were familiar with the whole scope of the FIDCR focused on the staff/child ratios, saying that they were too costly and that such high ratios were not necessary to ensure quality day care:

> Day care consultant: *"I have no problem with the FIDCR. I think that they're good standards, but the staff/child ratios are a little tight. You could have quality day care with slightly fewer. The '72 FIDCR were probably better than the '68. I am very comfortable with the 1:4 for infants. I liked the 1:3 better, but 1:4 works fine. Actually two adults can do very well with 7-8 infants, better in fact than one shut in a room with 4 babies.*
>
> Child development specialist: *"I question whether the staff/child ratios are operational, especially the 1:3 for infants."*
>
> Spokesman for DHR: *"The staff/child may be a little unfair and unreasonable. You have to give up something to pay salaries, and I don't think there is much benefit from a greater number of staff."*
>
> Director of a private Title XX center: *"About staff/child ratios -- sometimes you can have too many. If you had a trained experienced person, you'd need only 1 more for groups of 15-20. I do think the 1:3 ratio for infants is necessary. It's very difficult for our staff to do all they need to do for these 3 infants."*

> Another child development specialist: "*FIDCR imposed regulations with the intention of upgrading the quality but money's the big issue. You can't attract competent people without money. I question the commitment for day care at the federal level.*"

Another reason given for objecting to the FIDCR staff/child ratios was that it would cause the state to monitor two systems, one for the state staff/child ratios and one for the FIDCR staff/child ratios: "*The state was opposed to that....To push for a state regulation that came up to the federal regulation, in their opinion, would be more than could be afforded, and probably that is so. So they tended to fight that and, as I recall, developed a plan that sort of ignored that somewhat -- not completely, but put it aside and hoped it would go away -- while we developed something here that is more consistent with what is already in the state.*"

Public Input into Planning Title XX Programs

At the present time there is a reasonably high level of public input in determining the allocation of Title XX monies. It may not be as high as some would like, but the prevalent feeling is that Title XX planners are responsive to the needs and wishes of the public.

The current relatively high degree of public input into planning for Title XX programs contrasts with the amount of public input possible when the first Title XX plan was developed for the state. Partly because of problems associated with getting a new program off the ground and partly because of a conflict between the time when Title XX was enacted and the time when the DHR budget was presented to the legislature, public input was limited to reactions to the plan prepared by DHR. As one Title XX planner explains, *"DHR spent about 1900 man-hours setting up a system for dealing with input from the community into Title XX. We used people-oriented mechanisms to get people together and said, 'Here's all this stuff. What do you think about it?' And the whole damned ceiling came down. So the conclusion: let's make sure the consumers' input is listened to, and from the beginning."* The feelings associated with the first Title XX plan, however, still rankle. In the words of one city official, *"they had hearings concerning the allocation of Title XX social serivce funds for the state. But it was pretty much of a farce since plans had already been passed by the Legislature in February and hearings were held in March. What was so irritating about all this was that the procedure was insulting to people. It played needs off against each other -- epilepsy, senior citizens, and day care all vying for their share of the funds. And they were so hypocritical. They never tried to justify how the funds were going to be spent or allocated but just said, 'Gosh, that's a shame.' They put the burden of who gets the money back on the recipients."*

One reaction to the hearings for the first Title XX program was the formation of an advocacy group called the Consumers Union for Fair Funding (CUFF). *"There was a Governor's Advisory Commission but it was made up of Junior League, Jaycee, League of Women Voters types -- no poor and few blacks. CUFF got in to see the governor and has good legislative support. There are now Title XX Planning Councils all over the state (made up of 51% consumers). They meet once a month and elect two representatives to the State Planning Council."* CUFF's goals coincided with DHR's:

at present, there are 10 district planning councils composed of 51% parents, 35% agency representatives, and 14% community workers and politicians.

Although the mechanism was established for channeling public input early on into the planning for Title XX programs (i.e., network of district and state planning councils) no one seems to feel that the councils are the be-all-and-end-all of public input, nor do they seem to despair of getting anything better. Instead, there appears to be recognition that the Title XX programs are still in their infancy and more time is needed to smooth over the rough spots, that the Title XX Administration Unit of DHR is not unresponsive to public input, and that it is as encumbant on consumers, providers and advocates to see that the public be heard as it is on DHR.

> A Title XX planner: "*To get community input, a few years ago we did some needs assessment. Out of 27 services that DHR provides, day care was first. This was 2 years ago. They took that as their guide and have emphasized it since....I question the true validity of the way the assessment was carried out. They used a control group that was people who were already using day care, but I still feel it's the largest need.*"

> A director of a private Title XX center: "*Title XX regs can be changed. Providers/ consumers screamed -- now they're heard in the state. [DHR] is really hearing the pulse of the public. Day care has the highest priority for Title XX. I feel that the community has been heard but some feel this is not true. The meetings have been held at night when persons can have their say. And a committee was formed also to say what the needs are: the different county Title XX Planning Councils were formed about a year ago to address the needs and make sure they're listened to.*"

A spokesman associated with the public Title XX centers: *"There were three state hearings, and our advisory committee attended. The first hearing was just reacting to what was already planned. Then the later hearings had involvement of consumers and providers. There's not enough. I think there's going to be more. Lobbying is needed."*

A city official: *"We took issue with the state on a number of occasions -- challenged them -- so they would open up their process, and we did it also through our Bureau of Human Services. Sort of raised the level of consciousness about what is going on here in terms of planning for the use of Title XX funds....The state began to make some decisions about where our priorities ought to be. They put together a draft and submitted a proposal for us to look at and said, 'We want some input.' Our position was that this was a little bit late; we were seeing the tail of the tiger and had to force him out in the open and deal publicly with agencies that would have to relate to this plan. We didn't get a helluva lot of change: we got a lot of questions asked. We will continue on this until such time as we get this process open, and the citizen participation becomes real, rather than fostered."*

Another city official: *"Some people at state level really are concerned about citizen input; more are not concerned, however. Some citizens still may feel as though they've been co-opted into being another rubber stamp.*

Economic Segregation

Georgia's decision to put Title XX eligible children into 100% Title XX centers was made for administrative, not philosophical, reasons: *"Social and economic segregation is a very legitimate concern, and the fee system is the direction to move in. But as long as you have scarce resources, there's not much you can do. Philosophically, no one will argue that you need a good mix. But there is such a demand for day care that we don't have the money for that 100% Title XX centers are the best way* *to do it until we get more money from the state and the feds. It would be an administrative monstrosity to have a mix of Title XX and non-Title XX kids, a bookkeeping mess, etc."*

All of our respondents were concerned about the economic segregation inherent in having 100% Title XX centers, but they were even more concerned about what happens to the family whose income exceeds 61% of the Median Income for the state and thus is no longer eligible for Title XX child care. It was felt that Title XX care--economic isolation notwithstanding--was better than the kind of care parents could afford entirely on their own, and support for a sliding fee scale developed: *"Parents started screaming: 'Where are we going to take our children? What are we going to do?' The Title XX Directors reported this to the Title XX Day Care Directors Association who in turn took it to the state Title XX planners. Finally they heard us and action for a sliding fee scale began. The Directors Association worked to determine eligibility, cut-off points, collection and reports to funding source."* A fee system was developed, effective as of January 1, 1977, which is available for those families whose incomes are between 61-80 percent of the Median Income for the State. One respondent, familiar with the day care in both Detroit and Atlanta, commented: *"Ideally, I'd like to see centers mixed economically and mixed racially, and a different definition of eligibility is needed to achieve this. However, we have better Title XX day care in Atlanta where we have 100% slots used than they do in Detroit. Even where there is the potential for a mix, they're getting less good care. The care purchased for Title*

XX kids in Detroit doesn't look as good as Atlanta. They sure as hell aren't meeting FIDCR or even licensing standards." One child care advocate believes that open market day care is the only way to change the rigid economic segregation of day care centers: *"You need a system that allows free purchase within controls, a regulated voucher system. Ultimately you wouldn't have any Title XX centers. Give parents buying power; otherwise you don't really get care where it's needed but rather it is shaped to the institution, to the available service, and not to need."* However, she doubts that this type of system will ever be implemented: *"Economic isolation is one of the basic issues in day care, and the system holds it dear and insures it."*

Racial Isolation

We also asked respondents questions relating to possible racial isolation of children in centers in Atlanta. All of our respondents favored racially mixed groups:

> *I think every kid should be exposed to the totality of our society. I think that if they could begin in multi-racial, multi-ethnic situations, they would probably develop a whole lot better; they would adjust. Unfortunately, that's not the situation. Watching kids grow up, I have noted that around 6 or 7, they begin to notice that people are really different. They start the beginnings of very, very strong opinions about acceptance of others and themselves, and they do it, most of them, without having had the benefit of a multi-racial, multi-ethnic experience.*

> *A child learns better from its peers. If there is exposure to difference, then more can get out of the cycle. I hear of fighting and discord in the community. Some blacks have not been exposed to a lot of white people, and white people often only get information from maids. My centers aren't integrated just for the sake of integration. It's a learning process -- integration -- that involves parents, staff, and children. When I first started this business (in 1965), I really hadn't much exposure to white people and didn't know quite what to expect. They didn't know what to expect from me either. Now my black and white parents mix and everyone works together. It's really beautiful.*

Our respondents pointed out that such integration was the ideal and not the actual. Few centers in Atlanta are racially well integrated, and our respondents felt that the degree of racial mix was related to housing patterns: centers located in predominantly black areas are predominantly black, centers in predominantly white areas have mostly white children, and centers in racially mixed areas have a mixture of ethnic groups represented.

> *Atlanta is 80% black.*
>
> *The mix of racial groups just hasn't come about the way we'd like but location is a factor.*
>
> *I've never worked in an all-black day care center, but, back in 1962 when I started a staff, I always had half and half, even when I didn't have black children....It was all white for a long time and then I started getting calls from black people. There were no black people around us when we started. We didn't care who came to the school, but the opportunity just didn't arise.*

> *. . . . We were integrated and it's because they lived in the community. One was because the parent had heard how good we are. This is why we were integrated. In downtown Atlanta, where maybe they might bus them in, there is a mixture and further out both districts are predominantly white, so I believe it's the district more than just where they are placed.*

Respondents felt that a racially integrated staff was important, regardless of whether or not the children in the center were integrated.

> *Ideally, I'd like to see a mix for both kids and staff. If the center has a black population, it's nice to have the staff, at least, integrated. It's not appropriate to have 100% black children with a 100% white staff.*
>
> *I have white teachers in centers that are all black.*
>
> *The staff should match with ethnic groups to serve as role models, but there is some advantage to an integrated staff. It models interaction of adults, for instance.*

A question concerning the effect either ethnic-mix or separation of one group from another has on enhancing or retarding a child's development almost always elicited a two-part response: integration is important, but more important still is an environment in which the child is free to develop emotionally and socially.

> Child development specialist: "*In terms of child development and the interpersonal area of social-emotional development, the first group setting should provide a positive situation. It's probably the first time a child is with peers. Modeling for the child is more advantageous when there is a mix of ethnic groups.*"
>
> Public Title XX director: "*We live in a world where all must interact with all people, so groups should be mixed. Children should mingle harmoniously as early as possible. As for staffing, it goes back to the sensitivity of individuals. What is going to be a healthy*

> *environment for children first, not mixture of children first. You should not sacrifice anything just to get a mix."*
>
> Another child development specialist: *"I am not concerned about the segregation question, just so the center provides an environment where children can learn about differences....People should be sensitive to providing a variety of experiences, so kids can learn about differences. It is especially important for black kids in predominantly white centers to have a good self-image. Often differences are not perceived -- are blurred. You need to speak positively to black children."*
>
> A city official: *"I haven't got a strong opinion. Black children need high quality education, regardless of whether it is integrated or segregated. Unfortunately, often the all-black situations are* *perceived* *as worse."*

What we heard from our respondents in Atlanta was that, while integration is a social good and while children would benefit most from being in an integrated setting, integration per se should not be valued above all other factors that impact on what a child experiences in day care. This attitude is consistent with the emphasis many day care specialists place on working with the whole child--giving equal value to physical care, emotional nurturing, and mental stimulation. It also reflects their "make-do spirit": new equipment would be nice, experienced staff welcomed, and integration good, but if we can't have them all, we'll make our own equipment; hire "heart" and train later; and expose our children to as many different experiences as we can. A spokesman from DHR perhaps best summarized the attitude toward integration by saying, *"I think you should have an integrated staff, black/white, male/female, but I think if there were a definite law that said, 'you've got to or else' that we would lose some good programs. We found out* *about this when we were setting up our monitoring for civil rights compliance: there's just some areas where there are no blacks or there are no whites. And do you bus a preschool-aged child all the way across town just to integrate a day care center? As long as there was an honest effort, you know, to not discriminate against anyone and the children were taken on a first come, first served basis, I think the Office of Civil Rights would go along with us."*

Ethno-centered Program

If there were no strong insistence on integrated centers, neither was there a demand for ethno-centered settings. Unlike Seattle where respondents could rattle off a list of ethno-centered programs ranging from ones emphasizing cultural heritages (i.e., Muckleshoot Indian, Samoan, Filippino or Japanese-American) to ones emphasizing a religious heritage such as Buddhist, Muslim, Christian or Jewish, and unlike Detroit where respondents stressed that centers taught Swahili in order to attract clients, respondents in Atlanta were only aware of one or two centers which emphasized an ethnic tradition:

> *In most traditional centers, there is no ethnic identity preservation at all. In two centers, their curriculum had a heavy African orientation, but I see no sign of an ethnocentered movement.*
>
> *Haven't heard of that. . . a couple of programs were based on African tradition but they were private, not Title XX.*
>
> *I know of a few but it's not a strong presence in Atlanta.*
>
> *Not within the school system. There are certain things about ethnic groups that should be preserved, but this doesn't have to happen though at the center; it can*

> *happen at home. I don't want centers to operate in isolation -- they can preserve the ethnic pride without that. There are ways to do it within the center."*

One respondent, a director of a proprietary center, felt strongly that it was the parent's job, and not the center's, to instill an ethnic identity: *"Children know no colors; you have to teach them. My son has always been in a mixed environment, and someone called him black dawn at camp. He said, 'No, I'm not black; I'm chocolate.' He hasn't been taught that he is black; he is Negro. I can't let someone else come in and teach me that I'm black when I was taught that I was Negro by Mom and Dad....I am aware of one* (group focusing on ethnic identification). *I think it is wrong. I do believe that children should be given the chance to discover and to learn because they have more of an opportunity than we did (to learn) of the world around them by placing them in an environment and not letting the adults teach discrimination. Not: you play only with the red blocks and we, as adults, know why."*

Only one respondent seemed to be familiar with two ethnocentrically focused programs: *"The parents I see that are involved in this are the ones that were coming of age when this whole black thing of heritage was getting rolling, and they continue to identify very, very strongly. But I have a problem with that. I think that we can give children the benefit of their own culture in a multi-racial setting -- teach children to develop and have an understanding of them all. There were some programs at one time that were very racial in their approach. My concern is what is it doing to the child. In some instances, it might be whopping. It would be* *terrible to deny the child an opportunity to have a real, meaningful experience with his own heritage, but there have also been some centers that were attempting to play it down, which is just as bad. To give a kid a totally black experience is bad and to deny that experience is just as bad."*

Utilization of Day Care

We asked whether blacks used day care differently than did whites: were more blacks represented in the population of full-time users of day care? Did blacks prefer centers over FDCHs? Were there major issues and concerns which were similar across regional, ethnic and racial groupings and, if not, how did they differ? One respondent pointed out that, although he'd seen an equal number of whites and blacks in the centers that he had visited, there was a disproportionate number of blacks in all federally subsidized programs, not only in day care.

Others agreed that there were more blacks using center-based full day care than there were whites, but they attributed this to economic reasons rather than to a preference for type of program that could be linked to a specific ethnic group:

> *A greater percentage of lower social and economic groups use full-day day care because of the funding from Titles IV-A and XX.*
>
> *Just based on my own experience, I believe I've never had a part-time black child. I think you would probably find that where the black schools are located or the predominantly black schools that it's economically a matter of necessity to have the children there all day.*
>
> *Is the trend typical? Yes it is, because day care centers are located in the poorest neighborhoods so there are more black women working than are whites. White men have had better jobs than black men. There are more children*

> *in black families, and less and less grandparents (to care for the children) because grandma has to work until she falls on her face.*

One respondent explained the trend for a higher number of blacks to use full-day care in a center as a combination of economic necessity, preference for a day care center over a babysitter, and the effects of discrimination. "*I see it as a trend in traveling around in workshops and conferences. The black mother must work, not for the second car, because most of them don't have that second car, but they must work. They want children just like everybody else, but they utilize the day care center, say, from 6:30 to 6:00. You wonder why a child is there from sunup to sundown? Alright, the mother must be at work at 7:30, so she has to drop him off at 6:30. Mama's off at four, but remember Mom's black, and she's got to be the last one out of that office or wherever she's working. At the end of that time, she has to get on the freeway or catch the bus. Then she has to get to the center and by the time she gets to the center, she's got to get off the bus to get some groceries or something. So it's six o'clock already. She's already hot and tired and miserable, she picks the child up, and she goes home. She must utilize the center. Other than that, she would have to pay a babysitter and a lot of them can't be trusted anyway.*"

One respondent felt that whites used center-based full day care by choice and that blacks used center-based full day care because they had no choice: "*I think here in Atlanta that's economic, essentially. If you look at the blacks that are using day care, you'll find that it's more with a full working day. Take a full working day plus* *travel back and forth, you have an extended day. Whereas in many cases whites are seeking a social kind of adjustment opportunity and, in my opinion, I feel that one has to be exposed to a full day of day care in order to make the adjustments they wish them to make."*

Three respondents, however, felt that the higher proportion of blacks using center-based full day care reflected a choice of program that could be tied to racial and/or economic groups:

> A child care consultant: *"Most Title XX programs are in neighborhoods where most of the population is black. Experience backs up that blacks really like an educational setting -- equate education with success. That's OK but it can be overdone. I like to see teaching done in a natural setting. Whites look for family day care. Middle-class blacks are interested in a Montessori program or one highly motivated toward education."*
>
> A child development specialist: *"There is a greater lower social/economic group using center day care because of the funding. More lower income families are black and located in poverty areas in Atlanta. The lower economic group white rural population uses family day care homes."*
>
> A DHR spokesman: *"I've talked to people who have said that in Georgia there is some pressure to have your kid in an educational setting. Part of it, I guess, is our own fault because we've said, 'Day care is not babysitting.' To us, day care is that you're providing good care and supervision and, while we don't go along with any type of real formal education, we do think they ought to be offered an opportunity to learn. There's also the bit about integration of schools. The blacks particularly see having their kid in a learning situation as desirable -- not only because they feel their child has been left behind in public school and they don't want this to happen to the next one, but because there is a little more prestige if you say your child is in a private school.... I guess there is a higher degree of it (pressure for educational programs) in the urban areas, for both blacks and whites."*

These three respondents, although active in the day care field, do not have the day to day exposure to parents that day care directors do, and none of the directors we interviewed in Atlanta felt that program choice could be linked either to racial group or income level. Therefore, this trend may not apply to Atlanta although it seems to apply to a greater extent in Detroit and to a lesser extent in Seattle.

Concerns and Unmet Needs

Although our respondents differed with each other on a host of issues relating to day care in Atlanta, they were unanimous when it came to singling out their greatest concerns or isolating what they viewed as the unmet needs for day care in Atlanta. Regardless of their philosophical orientation or their association with a particular segment of the day care community, they agreed that day care in Atlanta needed more money and more slots.

Advocates are now asking for 24-hour day care centers to meet parents' needs for flexibility.

> *More centers are needed. I have to turn away so many . . . . My five centers all have long waiting lists.*
>
> *The biggest unmet need in Atlanta is the need for more day care! It would be great if we could have more funding. You really need federal funding in order to open a new center, however. There are many counties in the Metro Area around Atlanta that only have private for-profit centers and really need some nonprofit ones. I opened one center in one of these counties and enrolled 50 kids in three weeks and had 100 on the waiting list!*
>
> *We need money to support a sliding fee scale. The Title XX Directors Association is working on getting a Title XX sliding fee schedule, but even that won't be enough.* (The schedule was implemented on January 1, 1977.)
>
> *We're not scratching the surface of the needs for poor families have to have day care. But we are already getting a disproportionate amount of Title XX money here in Fulton County, so any new money is going where there is no Title XX day care at all.*

Summary

As we interviewed people in each of the three sites--Atlanta, Detroit and Seattle-- the descriptive differences across the sites which emerged throughout the data gathered in Phase II of the National Day Care Study emerged in our interviews as well. While the factors contributing to these descriptive differences are illustrated in the subsequent case studies of Detroit and Seattle and discussed in the first chapter of this report, report, it is the need for more day care slots in Atlanta that stands out most clearly in contrast to the other two sites. In Detroit, day care is "big business," and the competition between centers for clients is fierce. In Seattle, the attitude toward day care, as toward most other things, appeared relaxed and easy-going. Respondents there felt that the supply of day care pretty much met the demand. There might possibly be a need for more infant care centers, but they believed that most parents preferred family day care homes for infants and toddlers and that there was a supply of these sufficient to meet the needs of most parents. It was only in Atlanta that we heard the need for more day care stressed time and time again.

CHAPTER THREE: DETROIT CASE STUDY

Introduction

This case study concentrates upon center-based day care in Detroit. It portrays a loosely structured industry that is about to be regulated.

Of the three cities in the National Day Care Study, Detroit's centers are the least segregated. Yet, just a few years earlier, the city was synonymous with racism and racial strife. In addition the city has a higher percentage of privately run centers than either Seattle or Atlanta. Unlike Atlanta, Detroit's public school system does not presently provide day care for preschoolers. However, center operators predict that in the near future--the high unemployment rate among teachers will lead to day care being included as part of the schools, just as kindergarten is now.

Four major themes became apparent to the researchers concerning center-based day care in Detroit. First, there is the tension between the operators of for-profit centers and the operators of the nonprofit variety. There are differences of opinion over which type of facility can provide the best kind of day care in the most efficient manner. Second, there is the tension operators of day care centers feel about the possibility of the Detroit public schools entering the day care market.

Third, the researchers found that the state's mechanism for reimbursement for subsidized care is causing some problems in Detroit. A pay-as-you-go system is in place, and although the state of Michigan is sure that this will achieve the goal of "strict accountability," some center operators in compliance with this system are still waiting to get paid.

The components of quality care provide a fourth point for debate in Detroit day care circles. Federal money allows for an expansion of day care services, but it also opens the question of regulation. Some feel that regulations should focus only on ensuring a child's basic safety. The state regulations adequately assure this, they say, while the federal regulations will increase costs far more than they will increase the quality of care given.

Setting the Scene

The City

Detroit is a working town. It is an industrial center that drew disparate people who had three things in common: they needed jobs, they were mobile, and they were uneducated. Detroit was a town where you could "get ahead."

"Getting ahead" profited the city. Detroit is working on the second shift. Detroit is working downtown at the City-County Building. Detroit is going to Wayne State University at night to get a college degree. Detroit is parents working and children in day care centers.

Day care allows people, usually mothers, to work. According to the day care center operators we interviewed, the demand for this service follows the employment level. To the degree that Detroit's economy is subject to fluctuations, so also is the day care business. If there are layoffs at Chrysler, then the children of these laid-off workers are taken out of the centers. A bad year for the automobile industry is a bad year for Detroit generally.

It is at this basic level that day care in Detroit should be viewed. Although the issue of child development is an important one, day care is above all a service to parents. Sending a child to a day care center to be socialized, to interact with other children, is a luxury for most parents. The working parent must find someone to take care of the child or children. The price of this service must be affordable, and once the safety of the child has been assured, the parent is just as capable as anyone else of becoming a hard-nosed, utilitarian, cost/benefit analyst. Center operators maintain that parents demand a day care service that will allow them to go to work. This means that centers must be open for long hours and the price of day care must be kept low at the same time, perhaps no more than $40 per week. Diagnostic services, highly trained caregivers, special programs, and favorable staff/ child ratios must, they say, be accommodated within those limits, unless heavy subsidies are involved.

The view that day care centers help mothers to work represents a continuation of the thinking of an earlier era. The Lanham Act resulted in the creation of a number of centers throughout the country, most of them in cities that had heavy, war-related industries. Detroit was heavily involved both in production for the war effort and Lanham Act day care. Although the total number of children receiving this type of day care was probably less than 500,000 across the country, the Lanham centers are important symbolically in that they represented the intervention of the federal government into day care for the express purpose of allowing women to work.

The Lanham Act centers allowed mothers to work in certain industries at a time when--had there been no national emergency--women working and federal support of this would have been frowned upon. The war provided the justification for mothers to work. Now, work and work-related training provides the justification for more centers, more funding, and more regulation. Day care is a business--no more, no less--in Detroit.

Day Care as a Business

The notion of day care as a business underlies this examination of center-based day care in the Detroit area. Regardless of whether a center is expected to turn a profit or simply break even, all centers figure the costs of providing day care closely and few, if any, are permitted to run at a substantial deficit for long. Competition among centers is brisk, with many centers offering transportation and/or such extras as karate, ballet, French or Swahili in an effort to attact more children to their facility.

> *In 1967 there was an explosion of day care in Detroit. There had been relatively little in 196l. There were a few children with working mothers--mostly from one-parent families; some children of professional people; and some poverty level or special needs kids. Now entrepeneurs have entered the day care business in large numbers. Before that, it was a little old lady who loved kids.*

About one-third of the day care centers in Detroit are organized on a for-profit basis, and their interest in the economics of day care is self-evident. The other day care centers are organized on a nonprofit basis, and most of these are operated by churches. *"Not too many nonprofit centers are run by community centers or other big organizations other than churches."* In church-run centers, we were told, day care was a service offered to the community as a symbol of the church's social responsibility and to provide part-time employment for some of the church members, especially mothers of young children who needed to wages. However, owners of for-profit centers pointed out that providing day care in church facilities made economic good sense since some of the money coming in could be used to defray the expense of maintaining the church building.

> *There's not a great deal of difference between the profit and the nonprofit--and I say that not because of feeling that I have to defend myself in terms of being for-profit. I say it from the point of view that a number of c-urches go into day care not for the sake of the children but for the sake of sustaining themselves, and to me that's profit . . . no matter what you do with the money.*

Other respondents, regardless of their affiliation, agreed that there was little diffeence between nonprofit and for-profit centers, except "*the food is better in the nonprofits.*"

Directors of existing day care centers are concerned not only with competition from other centers but also with potential competition from the Detroit Public Schools. The public school system which represents a substantial investment in buildings and staff, provides an exmaple of how a nonprofit organization can be, in its own way, a business too. The system faces declining enrollments and the resulting unemployment of area teachers, who are represented by a strong chapter of the American Federation of Teachers. Day care operators fear that in order to keep its buildings full and its teachers employed, the school system will someday run a city-wide day care program, almost as a downward extension of kindergarten. As discussed later in this case study, their fears are not entirely groundless. At the present time, however, the Detroit Public Schools' involvement with preschoolers is restricted to a relatively small Head Start program. Although Head Start has both morning and afternoon sessions, individual children are enrolled in only one or the other but not both; so the Head Start program currently being offered is in no way synonymous with full-day care. Furthermore, when enrollment in the program was doubled in 1978-79, there was difficulty locating adequate space for the additional classes.

The tension caused by competition, whether real or threatened, was apparent throughout our interviews with directors of day care centers. Directors of nonprofit centers noted that it was extremely difficult to break-even and wondered aloud just what corners were cut by the for-profit centers. For their part, directors of profit-making centers maintained that they had to offer a "good" day care program in order to stay in business and that they did so in spite of being ineligible for such federal benefits as food subsidies because they were not organized on a nonprofit basis. At the base of almost any discussion--whether of staff/child ratio, educational requirements for staff, or type of program offered--was the question of cost: could a center offer this or that and still stay in business?

Day Care Trends

Day care became fashionable--or at least subject to fashion--as the market began to be developed. In black areas of Detroit, day care center programs were seen as a way of getting a rung up or a jump ahead. Licensing staff sometimes question whether the public is able to demand quality day care. They sometimes feel that the public falls victim to huckstering and point out the day care centers that claim to teach a child French, Swahili, or mathematics. One center reportedly took a class of four-year-olds to Paris so they could become "cultured."

Licensers notice the shift in trends and styles of center-based day care. A few years ago, a substantial number of the centers in minority areas taught black culture exclusively. *"Now they're backing away from this,"* one licenser notes. *"There isn't even a Muslin day care center."* It is strange, indeed, in the city where Black Muslims began.

According to interviewed operators and licensers, the trend now is toward pluralism. Several explanations for this were offered. The most ideologically based one is that there is no need for a city like Detroit to have centers that emphasize black culture. Blacks feel secure in their identity; they now constitute a majority of the population within the city limits. Adherents to this belief maintain that it is as unnecessary to give black children classes in Swahili as it is to give WASP children culture lessons that emphasize the meaning of the Union Jack.

A more economically based explanation, advanced by a black owner of a small chain of centers, holds that the limited amount of resources requires pluralism. That is, money is in the hands of whites, power is in the hands of whites, and only by having blacks attend the same centers as whites is it possible to assure high quality service for all. There is simply not enough money for two separate tracks, if both are to be of high quality.

Perhaps the second explanation is the more tenable one. Licensers and operators both note that the increase in the number of day care centers coincided with the infusion of large amounts of federal money. Certification of the centers, enabling the enrollment of subsidized children, has waxed and waned with the stringency and enforcement of state regulations and the reimbursement rate.

Day Care Not A Major Issue

Although day care is a growing concern in Detroit, it is not a very visible cause. One cannot point to more than one or two state senators or representatives who can convincingly be called "champions" of child care. Similarly, there are only one or two members on Detroit's City Council who have taken a serious interest in the subject.

The researchers came away from Detroit with the distinct impression that although the usual advocacy groups (such as the 4-C's) are in existence, they do not command much political influence. One member of the 4-C's notes: *"The legislators will buy-off on day care changes only on the basis of costs."* Thus, an issue that causes debate is the reimbursement rate. Operators of family day care homes and centers insist that they are drastically underpaid. In-home aides are paid less than the minimum wage. A 1977 increase in reimbursement rates only provided an increase of between four and six percent in the rates for all types of providers. Although the State of Michigan received additional funds earmarked for day care in June 1977, the money was, by and large, allocated to other social services.

The reasons given for why day care is not yet a major issue include that consumers are *"not articulate,"* that *"coalitions develop only in times of crisis,"* and that there is a *"split between profit-making and not-for-profit day care centers."*

One legislator, who had helped form a task force on day care, noted that the impetus came in 1975 when the Department of Social Services wanted to increase the number of billing units for day care centers from two per day to three per day. The newly formed task force, composed mainly of day care providers, was able to fight that attempt successfully. Yet, the same legislator notes, there is still no real leadership in day care circles.

The "movement" is just beginning, and the legisator estimates that it will take two years (until 1979) for it to gain the same impetus that the "senior power" movement has in Michigan right now:

> *On a scale from one to ten, awareness of day care was minus ten. Now it's plus two. . . . Some of the legislators still worry that day care will subvert the family.*

Ironically, he noted, legislative criticism was often heard from female members of the state house and senate. He feels that the key is to broaden the base of support for the idea of day care. He notes that day care advocates are often hard-working people who cannot take a day off to go to the capitol for a hearing. What he hopes to be able to do is to form a special subcommittee on day care. The committee could introduce bills that would coordinate children's services. In the meantime, the movement lacks leadership and as noted above, even draws suspicion.

The Provision of Day Care in Detroit: Who Shares the Pie?

There are two major points of tension among day care providers in Detroit. The first tension point is between centers organized on a for-profit (proprietary) basis and those run on a nonprofit status. The second concerns whether the Detroit Board of Education will make day care a part of the educational system.

Unlike Atlanta, where an important distinction is whether or not a center is a Title XX center, in Detroit, the profit-making status is the discriminating factor. The for-profit centers have a somewhat greater influence than their number alone indicate. This type of center banded together to form the Education Child Care Centers of Michigan. Later, that organization became the present day Michigan Association of Child Care Centers (MACCC). The existence of the MACCC may be seen as a recognition that it is the private owners who have begun to think of themselves as a group with vested interests, one that should have a say about regulations and standards.

The MACCC is a modest lobbying organization, the independent lobby concerned with child care. (As members of the MACCC pointed out to the researchers, the 4-C's are essentially an arm of the Governor's Office.) However, the independent MACCC is a small organization; according to one of its officers, the budget is considerably less than $10,000 per year.

Operators of private centers put forth several arguments as to why their type of center is superior for providing day care. The threads of their contention are spun around the notion of efficiency. Their argument runs like this: Because the proprietary centers are organized to make a profit, they are--by nature--less wasteful than nonprofit centers that can merely break even and still survive. Further, it is argued, private day care centers are much more efficient than a day care system run by the public schools, which can run at a deficit indefinitely. That is, the centers operate within a framework of existing regulations that guarantee quality and safety; then, they seek to maximize profit by such means as judicious shopping. One owner-operator noted that some of his biggest savings were realized by buying surplus equipment from the Detroit Board of Education. The necessity for, or drive toward, realizing a profit makes the proprietary centers use resources more effectively, or so the argument goes.

Proponents of private sector, for-profit day care are quick to point out that their lower cost figures are achieved under a handicap. Proprietary centers do not qualify for the Internal Revenue Service designation that would allow them to purchase food at reduced rates through the Department of Agriculture Child Care Food Program. Some of the more enterprising center owners have essentially split their center operations into two parts. The management is on a for-profit basis, and the ownership is on a nonprofit basis. This split allows the centers to apply for the Internal Revenue Service designation. This type of inventiveness is not pursued by most owners, however, since they are too small to profit from such a division of operations.

The "efficiency" argument cuts both ways. Pushed too far, it becomes a liability. Profit-making day care centers, like profit-making nursing homes, can easily become suspect for being "too efficient." Critics say that it is impossible to make a profit by providing quality day care, taking profit as *de facto* evidence of substandardness or a "short-change job."

The argument cited above reflects the feelings of a fair number of the directors of nonprofit centers. As one director of a well regarded, church-sponsored center noted: *"Some centers are just in it for the money. They cut corners. The child should not be a dollar sign."* The director added, *"The day care business is starting from the ground floor now. If we're not careful, it will become a competitive area of our social life."* The same director notes that the USDA subsidy he receives is essential to his center's operation and feels that, on that score alone, the non-profits have a huge advantage over the proprietary establishments. Without this form of government subsidy, he feels, his operation would not be able to break even and the church itself would have to kick in the difference.

Another director, connected with a well-endowed center, decried what he saw as the ability to convert social problems into business opportunities. "Anyone can open a day care center," he said. Although an advocate of high staff/child ratios, he believes that it is impossible for day care centers to provide the kind of individual attention that the high ratios imply and still make a profit. Because of this, he noted, the proprietary centers were being forced to "warehouse" children. Sort of shared wisdom that can develop. *"We don't seem to have an adequate philosophical base around child-rearing,"* he concluded.

Owners of proprietary centers are aware of this sort of criticism. One operator of a fairly large chain of centers told the interviewers that very large commercial chains, like Kinder Care, are looked down upon in the North. The public would not stand for that degree of commercialism. She did not feel this was true of other areas of the country, particularly the South. At the same time, she did not object to a 1:7 staff/child ratio but maintained that enforcement of a 1:5 ratio would lead to cheating by the centers.

The owner of another private center offered a similar opinion. *"A ratio of one to five is a slough-off,"* she says, adding that increasing the concentration of caregivers would only lead to more socializing within the staff.

Another owner countered the charges of profiteering more assertively, and pointed out that all day care centers are essentially in the business of being in business. He referred to churches that run centers to subsidize the church, or at least provide employment for some of the parishoners. He also claimed that the Detroit Board of Education, which is also "nonprofit," is making motions that indicate that it is moving toward providing day care. He said that one need only look at the declining public school enrollments and the lowering birth rates to know why the Board is interested in getting into the day care business.

"The Detroit Board of Education does not have to show a return on its investments. It is heavily subsidized, and it employs large numbers of organized individuals who will be unemployed unless the school system begins to provide services for the sub-kindergarten level. This market exists and has been exploited by private day care centers, among others." The question now becomes who will dominate the market in the forthcoming years.

The argument over who can best provide day care services shifts back and forth. The director of a denominationally sponsored center, part of a larger social service agency, stated that the center loses money on its subsidized children, perhaps as much as thirty cents per day for each child. She cannot see how profit-making centers can actually make a profit and still provide decent day care. *"They must do the short-change bit,"* she says. Yet, the mathematics of it all--the loss of the thirty cents per day for each subsidized child--implies that money can be made on privately paying children.

Day care and the Public Schools--a Major Issue

At the present time, the Detroit Public Schools do not provide day care. They do, however, provide the following services to preschoolers: Head Start classes in 38 schools which served 1200 students in 1977; Title I preschool programs in 37 schools which served 1500 children; and a parent/child program for children aged birth to three years.

> *We don't operate any day care situations where children are in for extended periods of time. All of our programs are educational-oriented and are half day programs.*

Although some programs offer both morning and afternoon sessions, different children are served in each session and the program operation is coterminous with the regular school day.

Regardless, operators of day care centers of all types are concerned that the public schools will put them out of business. It is a concern far out of proportion to the present level of activity: the total number of children presently served is fewer than 4,000 out of an estimated preschool population of over 35,000. Nonetheless the concern is there, and the reasons for it are many. The school-aged population is shrinking, and the provision of day care in the schools could provide employment to teachers already in the system. If and when additional child care monies are distributed by the federal government, individual day care centers simply could not compete on an equal footing with a public school system for federal funding in the form of grants, demonstration programs and the like. Legislation currently exists--and other bills are in progress--to delegate and divide responsibility for overseeing the operation of publicly funded day care facilities between the State Department of Education and the Division of Social Services.

Within the past 10 years, both the total population of the city and the number of students have declined, the latter from approximately 300,000 to around 230,000. As one official notes, "*That means you close buildings, or they are underused.*" Detroit is an old city with no place to expand its boundaries to recapture lost population. The encirclement by incorporated suburbs has long been complete. Detroit continues to lose population, and it is apparent that school closings will continue also. Employment opportunities for teachers will get workse, not better. Ten years ago, the contingent of kindergarten-aged children was 28,000; now, it is 20,000.

Hence the pool of prekindergarten children is now seen as a potential resource, although admittedly it too will shrink over time.

Having the public school in the day care business could provide unemployed teachers with jobs. If a staff/child ratio of 1:5 were observed, this could mean employment for 4,000 teachers. The probability that preference in hiring day care teachers would be to hire teachers already in the system is heightened by the fact that these teachers are represented by a strong chapter of the American Federation of Teachers. Not all of these teachers could possibly have majors in early childhood education. Those who think that the public schools should stay out of day care insist that public school day care teachers would be mostly English or Social Studies teachers who would accept day care jobs because they pay $12,000 a year, not because of any interest in preschoolers.

Most day care people feel strongly that their approach to the children in their care is very different from the approach that teachers in a public school system are likely to take:

> *Before I went into a preschool program, I was a teacher in a public school. My degree was in education; I had a K-12 teaching certificate, so I could have gotten away with teaching anywhere from elementary up. When I went into preschool, I found it a totally different world. But it took me two to three years to figure out that 'hey, this is not the same as elementary school. It should not be conducted like elementary school.' I have found that some of the hardest people to deal with and explain what a preschool program should be have been teachers in general. . . . I say this from the point of having been blind at one time and feeling the same way: "Well, if you can teach first grade, you can teach preschool.'*

A second concern on the part of day care operators is their inability to compete with the public schools for large-scale public funding for preschool programs. "I *think they are worried about the direction that the state of Michigan is going to take in terms of providing preschool programs. We have more and more of them coming in through federal funds into the public schools, and I think many people are worried about that--what it's going to do to their business. But they see themselves as providing a service different from what can be provided in the public schools."* Day care operators point to the Title I preschool program and to the fact that the public schools are one of two major grantees for the Head Start program (the other is operated by Catholic Social Services) to buttress their argument that future large sums of money will most likely be channeled through the public schools and not split among various small day care centers. This view is corroborated by a Detroit public school official who commented about the Family Assistance Plan, "*It (the public schools entry into day care) isn't going to happen in the next year or so. There would have to be some change in funding at the national level that would bring considerable amounts of money into the school system. I think if the bill that Nixon vetoed had been placed into action, we would probably be in day care right now.*"

Even though day care operators feel strongly that the programs they provide are different in substance from what is presently being provided by the public school system, they are doubtful that parents will be sophisticated enough to recognize and appreciate the difference. A frequently cited case in point concerned a demonstration program located in the Fenton-Holly area:

> We had a private school in the Fenton-Holly area that was running a certified* program--t-l and all that--and not because it had to; it didn't have any subsidized students. It had 25 children, about 5-10 acres of land, built from the ground up. It was a real quality school, no doubt about that. Charging $35 a week, the school was filled at 25. Along came the public schools who got their hands on some money somewhere and chose to put in a preschool program. They selected the site of an abandoned, condemned school in which they placed 30 children. The only equipment they had was inside a trunk. They had one teacher and one 16-year-old with 30 children. This was a public school and so they could do it, whereas the private school came under the Department of Social Services and they are always so sticky about having this much equipment and so many this and so many that. The lady that ran the private school complained to her licensing consultant; the consultant says, 'I don't believe it,' so they went over there and took pictures of the situation. To make a long story short, it took a long time but they finally got the school closed. Unfortunately for the people who owned the little private school, their reputation had been ruined by that time. Here was the killing part of what happened: the public school charged $1.50 a day or something like that, and the people who were charging $35 a week looked like monsters. It looked like they were really raking it in. People on the outside looking in, being naive, thought the owners were money-hoggers. The private school lost about eight or so of their children to the public school but it was just enough so they couldn't keep going. They eventually sold the place and moved away.

The difference between the regulations under which the public school center operated and those under which the private center was licensed came about because, until relatively recently, public school centers have had to meet safety standards imposed by the Michigan State Department of Education, while all other day care centers came under the jurisdiction of the Department of Social Services. As it happened, the public school center was in violation of Act 116, a 1973 state law that took effect in spring of 1974. Act 116 required publicly operated day care facilities to be inspected and approved by the Department of Social Services although the Department of Education continued to regulate the type of program offered in the public school centers.

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*In 1976, Michigan had three levels of certification for day care centers eligible to serve subsidized children (see discussion in Chapter 1).

> *There had been considerable concern about this from the public school administrators and the State Board of Education. Why were welfare people given responsibility to tell us educators about day care? It took a lot of meetings to convince them of the whys and wherefores and to reassure them about (Department of Social Services) people, that our licensing consultants were MA's in education--one of 'them.' There still was some noise on the part of some superintendents--some even threatened to take DSS to court. But by and large schools look upon the approval process as a helpful service and respect DSS.*

The significance of Act 116 has not been lost on day care operators. They view it as initially delaying but ultimately facilitating the entry of the Detroit public schools into the day care market. The delay stems from the requirements concerning the physical plant. One private center operator notes that the requirements for child-height commodes alone would eliminate most schools from being used as child care centers until extensive renovations were made. This will take time as will the working out of procedures between the two state bureaucracies. However, they also note that the fact that Act 116 even exists seems to be an indication that the state might favor the public schools when it comes to channeling federal child care funds. It will not be all that long, they predict, before they face major competition from the school system--competition they fear will be the end of most private day care. They base this prediction on the history of kindergarten in Michigan. Just as Detroit's kindergartens, in existence since the late 1800's are technically voluntary, so also would be the

Detroit Board of Education's day care centers. Center operators note that the costs of such day care would be paid by tax dollars and, at best, the publicly subsidized centers would charge only a minimal fee. As is the case with kindergarten, it would probably only be a short time before nearly 95 percent of the children in this age group were in attendance. Operators of other centers simply could not compete, they said, with seemingly free day care.

Subsidized Day Care in Detroit

In Detroit there are the no special Title XX centers for lower-income families, and parents have a great deal of freedom in choosing the kind of child care they consider appropriate. This differs from Atlanta, where centers tend to have either all Title XX subsidized children or no subsidized children.

In contrast, Detroit parents may place their children in any approved day care center or day care home. The parent may choose not to use either type of group facility and may decide to use an in-home caregiver instead. The choice of which type of day care facility to use, and which one, is left up to the parent. Thus, in theory at least, the acceptance of a subsidy does not mean giving up free choice. In reality, segregated neighborhood patterns and the location of industries make the choice a more constricted one. However, Detroit's day care centers are more economically and racially integrated than those in Atlanta or Seattle. This runs counter to the popular images of the three cities. One might expect that Seattle--with its relatively low numbers of minorities and its "laid back" public image--would have the most integrated centers. Conceivably, advocates of for-profit day care, free enterprise and freedom of choice may point to the relatively small amount of segregation in Detroit centers as proof that capitalism, even on an unorganized scale, can be responsive to the Social Good.

For lower-income families, the process by which day care arrangements are made and the bargain struck seems to be a mixture of independence and restriction. A household need not be on any other type of assistance to receive a subsidy for day care. One applies to the local welfare office, eligibility is established, and a "budget" is worked up by the child care worker. Employment or school attendance is verified by pay stubs, schedule, or letter. Together, the child care worker and the parent develop a "day care plan."

The parent is asked what type of day care is preferred. The worker can suggest some of the alternatives available; however, as one worker noted during an interview: *"We have to work with the clients. Most of them know what they want before they come in."*

According to the same day care worker, the least-used choice is the family day care home, a facility which serves a limited number of children, usually fewer than six. Social workers and day care operators report that the day care center is a method more often selected by blacks than by whites. A babysitter is the preferred alternative expressed by most clients. The parent often has a specific babysitter in mind, often her own sister or mother. Reimbursement by the state for in-home care is at a much lower rate, less than $4 per day.

Social workers cannot "volunteer" any method, or steer the client toward any particular facility. At the same time, they try to give some guidance. The purpose of the plan, in part, is to work out some means of securing child care services that would be realistic if the individual were to get off public assistance. Thus, one interviewed worker stated that a babysitter is probably more realistic for a mother who has many children than a center would be.

In some cases, a laissez-faire approach cannot work. The mother may have no idea where to begin her search. At such times, the worker may suggest a specific center: *"I hear that __________ is pretty good."* It is here that the worker's opinions and knowledge enter into the day care process:

> *We were driving on the west side of Detroit. I have just received a 'windshield tour' of the centers in the worker's territory. 'What do you think of that one?' I point. 'Mediocre. Really mediocre,' she tells me. 'Most of these centers are glorified babysitting. TV is a big thing. They watch TV.*

Typically, a worker's caseload is between 75 and 100 cases (families) per month. The variation among individual workers is from 30 to 120 cases, depending upon the worker and the season. In the summer, the caseload drops.

Mothers come to see day care as *"something to be expected"* a day care worker reports. At the same time, the emphasis on feasibility and the authorization for day care services only if the parent is enrolled in a training course or working point to one of the basics: day care is not the same thing as nursery school; it has a custodial purpose. The large percentage of profit-making centers points out another fact about day care in Detroit: the center is an adaptive institution. It is possible to appropriately price a business that operates on small margins; if day care allows mothers to work, then it is priced low enough to make working a profitable alternative to staying at home, with or without public assistance grants. Day care is a businesss that allows people to go about their business.

Once a child is placed in a center, the state day care worker is required to visit that child in that facility within the next 30 days. After that, the worker sees the child at least once every six months. At these visits, the day care worker--who has no licensing authority--forms his or her opinions about specific centers. Thus, workers have a stock of stories that begin, "I won't tell you the name of the center, but . . ." On the other hand, some centers are singled out for praise.

State day care workers note that the day care reality is somewhere in between the extremes of excellence and inadequacy. When things really seem amiss, the worker will call the state's licensing personnel.

Reimbursement Mechanism for Subsidized Care

According to sources at the Michigan Department of Social Services, getting assistance with day care is straightforward. They will also admit that things have recently gotten more complicated. As far as the State of Michigan is concerned, the more involved system is cheaper. It also comes closer to meeting the requirements of "strict accountability," a popular notion in Michigan and elsewhere.

The old way of doing things is worth examining, however. Under the old system, the parent, after having been declared "income eligible" for assistance, found day care for the child. Once the child was "placed," the child care worker at the welfare agency would authorize payments. These would come in the form of a bi-weekly check to the centers. In-home day care was paid for by a two-party check. Regardless of the form of the day care, the payments would continue until a "stop payment order" was issued.

The state found abuse under the old system. According to Michigan officials, the state was actually subsidizing center operators, and perhaps, even the children whose parents received no direct public assistance. That is, the children of middle-class parents were being subsidized in a _de facto_ fashion. Subsidized day care was intended to allow low-income mothers to work or be trained. According to the auditing department, parents would enroll in a training course and then drop it without telling anyone. Also, the center was paid regardless of whether or not the child was absent. Absences were being paid just as attendances were. Somebody, somewhere, was getting a free ride, or so it was alleged. The state became worried about accountability. Obviously, the system had to be tightened.

The new system, implemented in 1976, is a true pay-as-you-go system. The key is that the center must keep a detailed attendance record and submit a bill for only that time for which each subsidized child was present. A new form is used authorizing so many "units" of daycare, so many "units" of transportation, and no more than the stated number of each. Now that there is this attendance record, now that the billings occur bi-monthly, now that the bill can be checked and paid only after the services have been actually delivered, the system is more equitable. The department insists that this is so.

Reimbursement for center-based care is limited now to $7.26 per day for children between two-and-a-half to six-years-old* or the amount of money that private pay students at the center are charged, whichever is _less_. This means that day care subsidies from the State of Michigan are about $35 per week for each child. In no case may a subsidized child bring more money into the center than does an unsubsidized child. In most cases, state-paid children bring in less. However, one member of a state-wide advocacy group noted that *"the general population usually pays what DSS pays, so the Department of Social Services has become the rate-setter for the community rather than the other way around."*

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*For children between two weeks and two-and-a-half years of age, the maximum rate is $10.26 per day.

One day care operator expressed his feelings about the effect of both the old and the new reimbursement systems this way:

> *If a person is a snake (like in the story of the man who took in a snake and it bit him), he'll find a way to bite you, so don't think you are going to change him. What I'm saying is, if a person is out to make a profit and you're not paying him but $1.50 a day, he'll make a profit. So that old trick of 'let's not pay them what they should be paid and so keep them from making a profit' is just not working. There are centers that are charging $8 a day and not even make a quarter profit--a good 25 cents profit a day. And there are centers that are charging $5 a day and making $1.50 of that in profit. It has to deal with the person that's involved.*

The acountability system allows the Department of Social Services and its auditors to catch things when they go awry. Five absences in a month merit a call from the child's day care workers. Centers are not paid until the vouchers are filled out. This contrasts with both Atlanta and Seattle, neither of which have this sort of monitoring built into their systems. The payment rules shape day care in Detroit by setting the economic limits for its subsidy.

There is some disagreement over whether the new payment system has helped or hindered the rendering of day care service for the low-income. One senior official in the welfare department opined that the rules help: *"The (operators) know the department will pay. They don't have to hassle (like they do) with the private pay client."*

Yet some of the day care center operators interviewed in June 1977 claim that the department has not paid them all it owes since October, when the new system was put into place. One of the operators is filing suit. Department people retort that the number of children being subsidized by the state has not declined, and that new centers--many of which take state-paid children--are appearing all of the time. Welfare officials do admit, however, that in the beginning, when the new payment system was being put into place, there may have been some slight delays in making payments.

The new (1976) pay-as-you-go system represents not only an effort towards greater acountability, but also an increase in the amount of paperwork that the day care center operators complete in order to be reimbursed for their subsidized students. The Department of Public Welfare has divided the day into two "units." The first half of the day is known as the "primary" unit. A subsidized child attending this period alone will bring in 62 percent, rather than 50 percent of the $6.70 maximum reimbursement allowed by the State of Michigan. The last half of the day is the "secondary" unit. A subsidized child's attendance during this part of the day authorizes the release of 38 percent of the full day's reimbursement.

According to some day care operators, an attempt was made to cut the day into even smaller units, but this was rejected. The day care center operators felt that dividing the day into smaller and smaller units works against their business, since it multiplies the amount of paperwork and counting. It also requires that the child be present for more than eight hours in order to get the full payment. The two-unit day works best, the owners report, since it does take into account the necessary extra effort required to serve a child for a half day, rather than a full day. It also recognizes that the morning is a particularly busy time for centers.

The rate of reimbursement brought complaints from several of the operators interviewed by the researchers. One operator of a nonprofit center notes that the reimbursement rate for subsidized children always trailed the private market price of day care. In 1969, when his center charged privately paying children $25 per week, Michigan paid center operators $22.50. This difference continues today, when the center charges private, full-time students $35 per week and the maximum reimbursement from the State of Michigan is $33.50. It is likely that the gap will widen if the operator decides that, in order to break even, he must charge the private students $40 per week.

Impact of Administrative and Regulatory Policies

Whether a center takes subsidized children at all is, in part, the result of a number of interacting factors. The quickness of reimbursement is important to centers, particularly smaller ones with cash flow problems. More than one center operator asserted that the delays in making the new payment system operational had caused several centers to go out of business. On a day-to-day basis, however, it is the amount of the reimbursement that sets the practical limit on the level of services that can be provided. Regulations then serve to shape the kinds of services each center offers--if it is going to take subsidized children at all.

Licensing officials have noted that the number of centers accepting subsidized children fluctuates. In 1975, when the Federal Interagency Day Care Regulations (FIDCR), mandating certain staff/child ratios and standards, were tied to the receipt of federal funds, many centers decided they could no longer accept state-paid children. Then, when the State of Michigan obtained a waiver and decided to enforce only the nutritional standards, the centers began accepting the subsidized children once again.

A rapid change either in the amount of reimbursement or conversely, the number of staff required can bring immediate changes in the day care picture. For example, if the mandated 1:5 staff ratio requirement were enforced, it could come close to doubling the wage costs of a number of centers. Further, requiring more training of the caregivers would drive costs even higher. One operator of a non-profit center estimated that he would have to pay a college graduate at least $12,000 per year. These wages would cost the center more than $250 per week if the 1:5 ratio were enforced. This means that each child would have to bring in $50 per week to the center. With state reimbursement rates trailing those of the private market, he feels he would have two choices: (1) try to set a fee for private students at more than $50 per week, or (2) cease to take subsidized children all together. He feels that since his center is a popular one, he could fill the spaces with private paying children and--with regrets--he would cease to do business with the state.

Regulations and reimbursement rates thus conspire to put certain pressures on the day care system. A center must be certified in order to take in subsidized children. In order to be licensed, centers must comply only with state regulations. Federal and state money is welcomed, but the form of regulations and the stringency with which they are enforced shapes the choices available to those with low incomes. There is some concern that the FIDCR regulations might produce a high-paid, perhaps high-quality, but economically segregated day care system. This segregation can occur if the federal regulations enforced by the state are so stringent and costly to actualize that they make it impossible for the children of middle class parents to attend a center approved for subsidized children. Thus, a two track system would develop whereby unsubsidized children would attend centers much like the ones they do now, while subsidized children would attend "Title XX" centers where there is a high staff/child ratio and the government pays the bill.

Licensing and Monitoring

The State of Michigan uses a dual system to inspect and license day care facilities. Day care homes are licensed and in-home aides are certified by welfare personnel, who are tied into the system at the county level. Inspection of centers, however, is performed by the Department of Social Services at the state level. To do this, Michigan engages the services of licensing consultants who work exclusively with the providers. The caseload of a consultant typically is around 70 centers. Most of them work in metropolitan areas where the vast majority of centers are located.

The role of the consultant has two, possibly conflicting, aspects. The consultants certify the centers and thus are the enforcers of state regulations. At the same time, they must advise center operators on how to meet these standards. Depending upon which role the consultant takes, he or she may be seen as being either "helpful" or "picky."

Licensers complain that they are overworked and cannot spend the necessary time at each center. At a minimum, inspections are made every two years for licensed centers. Beyond this, each consultant is responsible for investigating complaints (whether made by a center employee, a parent, or a state day care worker), take depositions, and try to settle disputes. Center owners and operators complain that the consultants appear only sporadically, at odd and inconvenient times. Centers that do not pass muster can be placed on "unannounced visit status." Licenses can be suspended or even revoked.

The rules for having a center certified or licensed are clear, and in practice, flexible. For their part, the licensing consultants note that they try to get centers to comply with regulations. They realize that closing down a day care center means that the parents will have to look elsewhere for the services they need.

Most commonly, centers are put on notice for understaffing, overenrollment, and for transportation inadequacies. The latter type of infraction usually means carrying too many children in the center's "bus" (usually a van or station wagon) or not having two adults aboard at all times--a requirement which the operators continue to fight.

Complaints about understaffing come frequently from the state's day care workers. They are difficult to prove conclusively:

> *'People are not always around the children,' the day care worker tells me. A defense against a complaint of too few staff is, 'Two teachers were late.'*

Other common complaints include poor food, inadequate staff, and discipline. In regard to this last item, one licenser noted that some parents felt that there was too much discipline in their center, while others felt that there was too little. Another type of complaint surfaces from those who see day care as a way for their children to get a little head start in life: "My child isn't learning anything." Such complaints lie outside of the scope of the rules and regulation.

The licensers note that their work has increased since 1968. Until that time, a small permanent staff was more than adequate to handle the licensing and certification of day care centers. After that date, more federal money came in and more centers opened. This increased the commercial aspects of day care. *"You get men involved,"* a licenser notes.

That is, day care became entrepreneurial. The money got more interesting and the paid care of chidren, at least the managerial end of it, was no longer left to females.

Day Care Policy Issues

The tensions among regulations, services, and reimbursement influence the day care scene in Detroit as elsewhere. In an age of trade-offs, these questions are raised: Is it more important to have a high staff/child ratio, or is it more important for children to attend centers with other children from different backgrounds? A parallel problem concerns professionalism. Is it better to have warm, but relatively untrained caregivers, or is it the possession of a college degree and the training that comes with it the most important thing when the people taking care of a child are not the child's parents?

Staff/Child Ratios and Training

Regardless of whether a private center is organized on a for-profit or not-for-profit basis, the staff/child ratio and the amount of training that each staff member must have are issues of central concern. By increasing the number of caregivers that must attend a set number of children, or by requiring that caregivers have extensive formal education, centers run the risk of pricing themselves out of the market.

Unless the State of Michigan (and ultimately, the federal government) is willing to pay tremendously increased subsidies, it is likely that children of low-income parents will no longer attend the same centers as children of middle-income parents. Instead children of the middle class will be attending centers where the staff/child ratio is lower and where the caregivers have less training than the ones where the subsidized children will attend.

Although it is indeed possible that centers will continue to accept both privately paying and subsidized children, many day care center operators think that they have only three choices. They may chose to get out of the day care business entirely. Some of them may chose to do this, especially since the day care industry is young, many centers are new, and the capital investment can be quite low.

The second choice is to refuse to take subsidized children. One operator of a church center mentioned earlier in this study planned to do exactly this. With regrets, he would take only privately paying children. He reasoned that his center was a popular one and that he would have no trouble filling the empty slots with the children of mothers who worked at well-paying jobs.

The third choice would be to accept only Title XX children. This would be an attractive alternative for operators who own day care centers in low-income areas or who anticipated difficulty in filling empty slots. One owner of a small chain of centers located in different parts of the city states that he would simply convert his inner-city centers into Title XX day care centers and cater to a more middle class clientele for the centers he has in the suburbs. Additionally, he could offer bus service to take the child to the appropriate type of center. "*It would hurt, but I would survive,*" he says.

Presumably, most centers do not intend to go out of business if the FIDCR regulations, which include nutrition, staff/ratio, and staff training standards, are enforced. Most of the concern comes not with the nutritional standards--

most centers comply with these anyway--but with the staff/child ratio now being held in abeyance by the State of Michigan.

Staff/Child Ratios. The FIDCR regulations specify a staff/child ratio of 1:4 for children under three-years-old, 1:5 for three- to four-year-olds, 1:7 for children between four- and six-years-old and 1:10 for children older than six. There are few centers in Detroit which actually maintain the desired ratios at this time, especially for three- and four-year-olds. Day care operators maintain that it would be impossible for them to meet the FIDCR standards without doubling the care costs for parents who receive no government subsidies for their children.

Since staff salaries account for nearly four-fifths of a center's expenses, the mathematics of improved staff/child ratios involve computing labor costs. Thus, halving the number of children per caregiver nearly doubles the cost to the parent. Similarly, requiring a B.A. degree for day care center teachers would again increase the cost to the parents, perhaps again by a factor of two. The question becomes one of what the market will bear.

A parent fee of $35 per week for each child in a center is nearly average in the Detroit area. A fee of $40 to $45 per week probably would not make much difference to parents who hold moderately well paying jobs. However, an increase to $70 per week or more is probably out of the question, particularly if there is only one wage earner in the family. These parents would either quit work or find some other child care arrangements.

For the operators of private centers, regardless of whether they are church-sponsored or organized as businesses, the question becomes whether to take only subsidized children or to take none at all. This choice has already been made for the center operators in Atlanta. In Detroit, the question is up in the air.

Caregiver Training and Qualifications. The training of day care center personnel raises the same issue as does staff/child ratio, but in a less immediate fashion, since the latter could presumably be implemented more quickly. A day care aide may be paid as little as the current minimum wage, now $2.65 per hour. For a family of four with a single wage earner this is below the poverty level. If the day care worker is on the CETA program, the wage might rise to over $3. This is appreciably more, but still less than the wages that a certified teacher can command. A question asked by a day care operator during an interview was, *"Is the public willing to pay the equivalent of $20 per day for day care?"*

Should the Detroit Board of Education take over a large portion of the day care, the issue would become moot. The public would pay the equivalent of that amount, but it would be collected in the form of property taxes and government subsidies to education.

Not surprisingly, an interviewed official from the Board of Education stressed the quality, not the cost, of this type of day care. *"We're interested in raising the achievement of inner city kids,"* he notes. The cost of a "certificated person" is put at $10,500 for ten months' of work, plus an additional 20 percent for a full year's program. The staff/child ratio would be hign. *"We feel there should be a lot of interaction between teacher and student,"* the official states. Because so much of the direct cost would be hidden by subsidies, the Board of Education could conceivably charge parents relatively little or nothing; however, the true, per-unit costs would be more than the costs of private day care.

Economic considerations aside, "training" usually means formal education, preferably in early childhood development, although some centers encourage in-service training as well. Much of the background of this debate centers around the economic issues covered earlier in this study, but philosophy enters into the picture, too.

Current state regulations specify that center directors should have a minimum of two years of college. Regulations are now being contemplated that will require directors to have not only two years of college, but also 12 hours in child development, child psychology, or early childhood education. Other care providers will have to have at least one year's training in a program approved by the State Depatment of Education.

Some owners see the proposed requirements as a trend toward increasing specialization, a movement away from the warm, purely loving environment they feel should characterize day care. Economic issues aside, they question whether such training is necessary or desirable. Such requirements are viewed as the beginnings of bureaucratization and the belief that education _per se_ has no relation to the ability to take care of toddlers. They state that the requirements will have the effect of forcing warm, competent individuals out of the day care field. Opponents of stricter educational requirements claim that in place of the experienced mother, young trained but essentially inexperienced workers will be substituted. To such critics, the educational requirements defeat the purpose of the regulations to provide quality day care.

Center operators fear that the 12 hours of early childhood related coursework will be only a starting point. They foresee a time when a college degree will be required for all staff. When this happens, it could mean that many of the "warm, loving mother figures" already on their staff would no longer qualify for the jobs and that, they say, would be a true loss.

In Detroit, those who believe that caring for children is an individual thing that cannot easily be taught are characterized as "warm fuzzies." They believe that child care is an art. Contrarily, those who believe that the best care is given by those who have the proper training are called "educators."

There is no reason why these two viewpoints need to be opposed. Presumably, one might be "warm and fuzzy" as well as "trained." In practice, however, NCDS staff found tension between the two groups. Not surprisingly, one can often predict on which side of the fence individuals sit if their affiliations are known. Thus, public school personnel are likely advocates of professionalism. Private day care center operators, who oppose a public school day care system, can usually be counted on to advocate warmth and to rail against enforced professionalism. Those who train teachers also tend to side with the Detroit Board of Education on this matter.

For operators of private day care centers, the proof for their position lies in their experience. They point out, for example, the mother of four children, a member of the parish, who simply has "a way with children." Working at the center is a way for her to make a little extra money and to provide decent care for the children of working parents.

An owner of a profit-making center may point to an establishment started by a group of unemployed teachers. *"They had 165 milk cartons and used them for everything,"* he says. That center closed after a few months and he wound up with most of the children from it. The same director will also allude to the substandard center "in the Fenton-Holly area" that was allowed to operate for over a year simply because it was tied to a public school.

Operators of private centers stress that day care is different than schooling. They note that those with degrees were trained as teachers first and only incidentally as caregivers. They insist that children need the chance to grow unfettered so they can learn to be independent. A mother of four, because she has raised youngsters of her own, is likely to allow this sort of freedom. A "twenty-one year old girl with a degree," the operators argue, will likely not.

In contrast, the educators insist that motherhood, by itself, is no guarantee that an individual can take care of 10 or 20 preschoolers. The mother of four may be all right for the average child, the educators will grant, but they will not be able to diagnose dysfunctions in the child that needs extra help. Warmness and fuzziness thus become suspicious; it is viewed as a synonym for merely "warehousing the children." Lack of trained caregivers is seen as the cheap way out, a means to cut corners and make a profit off the children.

One educator notes: *"Warm fuzzies are great, but you need more than that."* Then she adds, *"You don't get awareness by merely being warm."* She then notes that even with her degree of experience she still manages to learn something new at each workshop.

Each side in the debate knows, and even half accepts, the criticisms of the other. The owner of a proprietary day care center may state that the views of the eductors are unrealistic, rather than incorrect. They note that there is a market for day care and their establishments respond to it. Center operators with lower- and lower-middle class clientele know that they exist because parents have to work. All the touching, caring, and teaching mean nothing if the basic, custodial needs of day care are not met at a reasonable price.

Center operators are also quick to point out the amount of spurious "learning" and "teaching" that goes on in centers. They can point out other center owners, the ones out to make a fast buck, who claim to teach children French, Swahili, or the martial arts. While none suggest that educators advocate this sort of teaching, critics hint that there is no practical base to the academically oriented approach. The educators, it is said, are interested in perpetuating their own existence by becoming "experts" in the raising of children, something that day care operators usually feel cannot be taught inside a college classroom.

At the core of the argument made by the "warm fuzzies" is the notion that children develop normally if they are given a warm atmosphere. A purpose of day care thus becomes socialization. Having too much structure becomes suspect. Further, the advocates of warmth point out that there are no empirical studies to show that a specially trained caregiver is any more effective than an experienced mother in providing day care. (National Day Care Study data indicate, however, that child-related educational/training is related to more positive child and caregiver behavior in day care centers. However, years of formal education and experience were not related to better child outcomes.

The educators counter: "*Ask your private day care center operator which he would rather have--if he could get them at the same price--a mother who raised four children, or a specialist in early childhood development?*" The more savvy among the educators push the argument further. They claim that the best caregiver would be a "warm, loving, trained mother." Children under this sort of care would be "supplemented, reinforced, and expanded." They would also be "intellectually stimulated," the researchers were told. Their "sense of humaness would be enhanced."

The educators recognize the importance of warmth, but seem to feel that it is not quite the scarce commodity that the advocates of warmth feel it to be. The main advantage of training is the ability to dignose as well as to structure the environment. Educators question whether an untrained person could recognize a case of moderate retardation. They also note that, once a disability is recognized, the child can, with proper supervision, receive the necessary services and continue to be "mainstreamed"--that is, continue to remain in the same center as the other children.

Educators operate under the "medical" or "professional" model of day care. They tend to feel that the notion of day care as "socialization" is a lame one, a cover-up for bad management and a concern with corner cutting: "*If the children run haphazardly, they (the private operators) call it 'socialization.' In reality, the children are herded in large groups.*"

Private operators counter this herding argument. They say that the problem with the professional educators is that they believe in too much structure and discipline. "*I know,*" one of them told the researchers, "*I was a teacher and I was blind.*" He notes that, since he has started his day care center, he has become more easy-going and less authoritarian toward his own children as well.

Social Services

The question of whether day care centers should provide other social services represents another point of debate. Those connected with well-endowed centers (e.g., those which function as research centers, or those connected with the Head Start Program) are adamant in their belief that child care does not exist in a vacuum. The counter to this is that, in Michigan at least, there are already other agencies in the community which can provide specialized social services at a low cost. The job of the day care center, in contrast, is to provide child care.

The definition of the purpose of day care is at stake in these arguments and counter-arguments. The protagonists of structure are also, by and large, the protagonists of education for caregivers. These advocates seem to endorse the notion of holism, the idea that the whole child and the whole family is involved in the day care process.

Parent Involvement

The dicotomy between those who endorse holism and those who do not is further illustrated by asking caregivers how they feel about parent involvement. Those who insist that parents have a voice in the program are the same individauls who advocate professionalism and structure. They often operate centers that are recognized as being "quality" institutions by the educated middle class.

In contrast, those who believe in less structure, who value warmth more than training in the caregivers, tend to be less emphatic about the necessity for parental involvement. One such day care center owner noted that in some years his center has parents' committees, whereas in other years it does not. The onus is on the parents. Another director of a well-regarded church-based center specifically stated that he preferred not to have parents involved. He claims that, indeed, the parents at his center are so satisfied with how their children are doing that they do not even express interest in creating a parent advisory board.

There are exceptions, of course. One couple who own a private day care center that stresses a moderately loose structure insist that centers must work at getting parents involved. The owners observe that working parents are often tired at the end of the day, and so it is good to have something planned for any meeting of the advisory board. Quite often, this takes the form of a pot luck supper and a question-and-answer session afterwards.

There is agreement among some center owners concerning what it is that parents "really want" for their children. One black operator of a chain of centers states flatly that blacks look first at the physical facilities, while whites, on the other hand, ask about the staff's training. Another operator notes that blacks prefer the centers to discipline their children, whereas whites feel uneasy about this. A licensing inspector maintains that blacks want their children to be taught the basics of reading and math--the younger the better.

Other day care people interviewed by the researchers claim that the above characterization is "stereotypical" and all too easy. They claim that the distinctions are more class-related than race-related. Blacks want education and the nice facilities because they are trying to "make it" and have not arrived yet. They feel insecure. In contrast, middle-class whites are more relaxed. Lower-middle class white parents who want the best for their children tend to react like the blacks who have aspirations of upward mobility, or so the researchers were assured. The poor have less awareness of the varieties of day care and are content as long as the child is happy.

A private operator states that changes in the market are appearing. Some parents are beginning to ask if the centers have "real" teachers with degrees. This may be the beginning of a shift in philosophies that may signal the rise of professionalization. If this is accompanied by an increase in subsidies, the rise of day care may be coupled with a rise in the status of caregivers. In the meantime, there are differences in opinion. Some believe that children will develop if they are given the freedom to do so. Others feel that children need structure and encouragement. Thus, though economics figures in, there are genuine differences in philosophy concerning the nature of children and the nature of good day care.

Day Care Needs

Since day care centers are responsible for caring for children over long periods, center personnel find other areas of agreement, regardless of their individual affiliation. They cite the necessity for being open up to 12 hours per day. Most centers begin their day between 7:00 and 8:00 A.M., in time for the child to be dropped off on the parent's way to work. Most centers stay open until at least 6:30 p.m. This gives parents who start work in the middle of the morning time to pick up their children on their way home.

The difficulty comes when the parent works an odd schedule or a rotating shift. There are few centers which can provide child care beyond the normal, albeit amended, working hours. Given the essentially entrepreneurial nature of day care in Detroit, it is surprising that centers have not begun to offer this service.

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Another frequently expressed need is for infant care. The reasons for this lack are not clear. Detroit is no different from Atlanta or Seattle in the availability of this service. High staff/child ratios presently mandated for infant care may account for this, in part. Presumably the cost of infant care would be high and it is likely that working parents seek other means of obtaining this service than from a center.

Once the wrangle over profit (and whether it is a fitting motive for providing human services) is set aside, agreement between profit and nonprofit centers is reached at another point. Both types seem concerned with letting the child develop and become independent in a safe setting. When shown a list of 30 or so items that could contribute to quality day care, all interviewees singled out physical safety as the single, most important factor.

Most operators report that the one thing mothers look for in the center is security. State regulations specify what each center must have in the way of fire doors and the like. Operators of centers note that, above all, it is the physical standards that the public schools cannot meet. For this reason alone, they question whether the Board of Education should get into the day care business at all.

Conclusions: The End of Laissez-Faire

Increased federal funding and along with it more stringent enforcement of some form of federal day care regulations seem to be inevitable. Their impact is likely to vary according to the context and history of different localities. For example, one might hypothesize that in Atlanta the day care market will be expanded but not significantly altered by increased federal funding. The state regulations governing day care in Atlanta are already quite similar to those contained in the FIDCR, so enforcement of federal standards will not require day care operators to make major changes in their programs. Furthermore, the Atlanta day care "pie" has long since been divided, with some centers--the nonprofit Title XX centers and the centers run by the Atlanta Public Schools--primarily serving subsidized children and others serving privately paying children.

In contrast, the impact in Detroit is likely to be greater. No only are the current FIDCR more stringent--at least in terms of staff/child ratios--than the state regulations, but increased federal funding may attract the public schools into the day care market. It is too soon to say just how the day care market will ultimately be allocated among the various types of day care centers in Detroit, but an increased federal presence there will undoubtedly cause a shift before equilibrium is once again established.

Federal monies and concomittant regulations notwithstanding, it appears that day care in general will more and more come under state scrutiny and regluation. But again what the result of this will be is uncertain. State interest in how its monies are being spent has already led to a tightening in the categories of children being served by subsidized day care--with preference being given, for the most part, to job-related day care for children from low-income families rather than to day care as a form of children's protective services or as an alternative to foster care. The recent change in the state's reimbursement and accountability system is another indication of state interest in the day care market. So far, however, the state's actions seem to be related more to fiscal accountability than to an expression of an overall phyilsophy about child care.

Detroit is certainly not unique because there is no single, comprehensive philosophy about what day care should be. However, in Detroit the lines between various day care interests appeared to be more sharply drawn than those in the other two sites; we saw little indication of ad hoc coalitions of various groups or of single day care organizations which had significant political clout--coalitions or organizations which might indicate the shape day care will take in the future. At present, there appears to be a full-range in the type of programs offered by the centesr and, in the absence of any comprehensive day care philosophy, caveat emptor seems to apply for the present as well as for the immediate future.

CHAPTER FOUR: SEATTLE CASE STUDY

Our team of three field researchers visited Atlanta first, Detroit next, and Seattle last, spending a week in each city. It was perhaps only natural that while we were gathering data on what it is that makes Seattle unique, we were at the same time already making comparisons among the three sites. Seattle, like Detroit, is a company town. Although it builds aircraft rather than automobiles, what affects Boeing affects Seattle as well. Like Atlanta, Seattle attracts a fair amount of convention business, although it is the Space Needle soaring above the Seattle Center that visitors remember instead of the elaborate hotels that characterize Atlanta. In terms of day care, similarities are also found. Seattle parents who are eligible for Title XX subsidized day care can, like their counterparts in Detroit, place their children in any licensed facility which then bills the state for the children's care; in Seattle as in Atlanta, there are significant numbers of nonprofit centers.

Although the cities differed in such things as the ways in which federal funds were administered, the day care communities in each had many concerns in common. Many respondents in all three cities thought that the staff/child ratios contained in the Federal Interagency Day Care Requirements (FIDCR) were too stringent, and positions on such issues as staff qualifications, parent involvement and the provision of social services broke down along similar lines in each site. The proponents on either side differed from city to city but the arguments were familiar.

What made the most marked difference among the three cities was the attitude of the people living there--an attitude which was not only reflected in their use of day care and the types of day care preferred but which also extended toward the provision of social services, the sort of regulations they supported, and the way in which they lobbied for day care. Although what happens to children in day care depends on the center and not on the city, the ways in which day care is organized and regulated, the acceptability of putting children into day care, and the purpose or goal of day care vary from city to city.

In some cases, the differences can be easily documented: this is the way Title XX funds are used for day care, this is the type of day care available to parents and, even, this is how respondents in Seattle view state and federal regulations governing day care. For others, however, the documentation cannot be so clearly established. Whether Seattle still has a "Klondike mentality" or a frontier heritage of independence--and what impact such an inherited philosophy has--is largely a matter of conjecture, although many respondents strongly asserted that a pioneer spirit exists and affects the way in which things are done. What follows is an attempt to portray what it is that makes Seattle different from Detroit and Atlanta vis a vis day care.

Overview

Seattle is a pioneer town grown into a city. Although its industries have shifted from trapping, logging and trade to aircraft and shipbuilding, shipping and the manufacturing of forest products, Seattle retains an independent pioneer spirit. Some contradictions result from this independence. On one hand, Washington has, at times, been home to speculative business and radical movements: *"The State* *of Washington has the socialism of the unions, and Seattle is a town of Dave Beck. We had a big WOBBLIES* movement here and in the '60's a big SNCC** following. In 1919, during one of the 'red' scares, Mitchell Palmer referred to the state as 'the Soviet of Washington'--what he said was 'the 47 states and the Soviet of Washington.'"* On the other hand, Washington is also home to various conservative organizations: *"Although Washington has the image of being liberal, the John Birch Society is very strong here, and most people are more concerned with issues like water preservation than they are about social services."*

Seattle is a city of neighborhoods spread over a multitude of hills. Unlike Detroit and Atlanta where neighborhoods are defined on the basis of the racial or ethnic background of the people living within them, in Seattle the various neighborhoods are defined by geographical boundaries. The community of Magnolia is situated on Magnolia Bluff, Queen Ann on a hill of that same name, the University District is reached by crossing a canal joining Lake Washington with Puget Sound, and so on. The South End is less wealthy an area than, say, Magnolia, but there are no broad areas which can be clearly identified as slums or ghettos. There are indeed housing projects and particular sections within neighborhoods which qualify as target areas for social service programs but in general in Seattle a person's address gives no clue as to race, ethnic origin or income level.

The city's setting--overlooking Puget Sound and the Olympia Range on the West and overlooked in turn, on clear days, by Mt. Ranier and the Cascade Range on the east--makes the temptation to go up into the mountains or out to the islands nearly irresistable, and people in Seattle claim that the city is deserted on weekends.

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*A revolutionary labor organization of the early 20th century, commonly called the Industrial Workers of the World (IWW), or the "Wobblies." Founded in 1905.

**Student Nonviolent Coordinating Committee, founded in 1960.

Possibly because of this weekend exodus, the city has been "slow" to develop its urban cultural and recreational facilities. However, Seattle Center (hastily constructed for the 1962 World's Fair) continues to attract locals as well as tourists. In addition to being home to the soaring Space Needle, it houses the Seattle Opera, Symphony Orchestra, a Science Center and a sports arena. Seattle has major league football, basketball and baseball teams, several museums and a zoo. The markets near the waterfront have been renovated and are thriving. In addition, a number of small stores are being developed on the adjacent wharves. In Pioneer Square--formerly a skid row of sorts--chic stores and restaurants exist side by side with missions serving the needy. The mission clientele have not been shunted off to some less visible portion of the city. They fill the benches in newly developed parks and, if either the absence of iron grills on the store windows or the presence of throngs of shoppers are any indication, pose no threat to the prosperity of the merchants in the area.

Maybe hills help to define a city and keep it on a human scale, for Seattle is certainly a people-oriented place. There are trees and flowers everywhere and places for people to sit: benches outside buildings, fountains with wide low walls around them, park benches scattered here and there along the streets, and parks everywhere. There is even a park ingeniously built over a freeway.

The tall buildings in the central business district do not appear out of place the way they do in Atlanta or Detroit where their height is in stark contrast to the flatness of the surrounding land. It is difficult in either Detroit or Atlanta to see exactly where the city ends and the suburbs begin. Not so in Seattle. From the top of the Space Needle, the city appears small and compact, nestled on hills between Puget Sound and Lake Washington. In a single glance, the observer takes in office buildings, Seattle Center, wharves, factories and houses and is reminded that a city is for living and playing as well as for working.

In a relatively small and compact city, one might expect to find a great sense of community, of identification with the city itself, and such a spirit exists to some extent. People in Seattle identify strongly with the fortunes of the University of Washington football team, the Huskies; mute testimony to this are the street signs posted at intervals on streets around the stadium which read, "No Parking 10 A.M.-6 P.M. Day of Football Game." The signs are applicable only a few days a year.

A sense of community spirit was also expressed a few years ago by billboards erected on the outskirts of the city. At a time when layoffs at Boeing made workers leave the city in droves, the billboards read: "Will the last person to leave Seattle please turn off the lights."

Our respondents felt, however, that there was little sense of community spirit exhibited on a day-to-day basis. *"People send their weekends and evenings going out into the mountains: there's not much community spirit."* Added to this is the frontier inheritance of independence--*"no one should tell you what to do."* Furthermore, people look to themselves and not to the state to get things done: *"The demand gets to great that somehow a person or a group gets found to do it."* This lack of on-going community spirit, a frontier heritage of independence, and an emphasis on self-reliance all contribute to the loose structure of Seattle's institutions and society.

While there may not be much community spirit per se in Seattle, there are indeed communities. Although neighborhoods are defined along geographic rather than ethnic lines, Seattle is a city of ethnic communities--groups whose members may or may not live near each other but which have a significant impact on the complexion of life there. While the majority of people living in Seattle are of Anglo-Saxon stock, Seattle "ranks fourth among American cities in Asian populations, fifth in native American Indians."*

It was only in this city that our respondents were able to rattle off a lengthy list of ethno-centered day care programs:

> *Christian parents want Christian programs; Muslins want Muslin programs. The Muckleshoot Indians want their own culture taught, and so do the Buddhists, the Vietnamese, and the Filipinos.*
>
> *Some groups are getting strong enough to operate their own center. The Samoan community may be doing this, and there is a group of Japanese-Americans, too. But none of them are saying that they want it just for themselves; they want their children to be aware of their heritage but they want to share it too.*

There are also community organizations which focus on special interests. The day care community is one of these, as are groups focusing on black child development, mental health, special education and so on. Although each of these communities has an ongoing interest in, and commitment to, their particular speciality, few if any of them constitute a permanent pressure group--one which would lobby for long-range planning on the part of the various state agencies or the legislature. Seattle has been described as a city in which "its neighborhood organizations, like most of its public commitments and achievements, tend to be ad hoc rather than permanent."* The same holds true for its special interest communities. They coalesce around a crisis, lobby efficiently and effectively and then, once the crisis has passed, return to their local day-to-day efforts.

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*Roger Sales, Seattle, Past to Present (Seattle, Wash: University of Washington Press, 1976).

This patchwork collection of ad hoc committees and temporary coalitions has had its successes in the past: Seattle Center and the renovation of Pioneer Square, for example, owe their existence to ad hoc citizen committees. A 1970 report on day care, by the Council of Planning Affiliates (COPA), in Seattle-King County says, "during the period 1966-67, when the Puget Sound Region was experiencing a period of economic and population expansion, many efforts, in the main separate and uncoordinated, were made to provide additional day care. Churches, private operators, voluntary groups in the community and individual mothers took steps to expand or offer new day care services."** Nonprofit centers sponsored by churches proliferate in Seattle: ". . . *there are a great many churches involved in day care. They do it not because day care is a priority by itself but because they are meeting community needs, because parents have to work and need a safe place to leave their kids.*"

Of course, this reliance on ad hoc committees, special interest groups, and private citizens has had its drawbacks as well. For one thing, it has meant that it has been difficult to develop a comprehensive and consistent approach to day care on either a legislative or agency level. The state has experienced great swings and shifts in popular causes:

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*Sales, op.cit.

**Council for Planning Affiliates, Day Care: Seattle-King County (Seattle, Wash., 1970).

> *In Washington, they have been very liberal at times--they have moved ahead, made big leaps and bounds. Then they'll get a conservative administration, and they'll draw back and lose ground. It's been that kind of backing-and-forthing in Washington.*
>
> *Day care has been such a problem area within the Department (of Social and Health Services). There have been so many people involved in it--so many cooks in the pudding that you never knew what flavor it was, let alone when it was going to be done. It's incredible.*

Respondents in Seattle frequently contrasted their state with the neighboring state of Oregon. At times they dismissed the population there as other times the slow, steady progress those "conservative farmers" have made has been praised wistfully and the ad hoc nature of social service planning and delivery in Washington lamented.

> *In Oregon day care advocates organized by the Oregon 4-C's* go en masse to the legislature. They take kids to the legislature. They're with their legislative representatives in between sessions. And they get sponsors for new legislation. Oregon is a conservative state. They move slowly but when they move their gain is consolidated. I think in Oregon--and I'm not denigrating the state agency staff in Washington by any means in saying this--you build a highly committed staff because they're always trying to push ahead. They're held back by conservative administrations and legislators but they do make gains and they keep moving ahead. So your commitment remains steady. Whereas in a state where you get something and 'oh boy you're going great guns!' and then you lose it, I think something happens to the whole staff commitment.*

Another problem caused by the reliance on special interest groups for lobbying is that certain special interest groups are disproportionately successful in achieving their end, sometimes to the detriment of groups almost identical to their own:

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*Community Coordinated Child Care: Under a program initiated in 1968 by the Office of Economic Opportunity to coordinate all federally funded day care, states were encouraged to develop local groups to coordinate child care services in their local area.

> *The American Indians have special eligibility standards which are higher than the income standards non-Indians must meet in order to qualify for free Title XX day care. And the reason for that was that the American Indians invited folks around here who make decisions to a meeting and, I think, put them on the other side of the room from the door and wouldn't let them out. Only there were only five tribes represented, so if you have taken a look at our current Title XX plan, you'll notice five reservations are the only ones that are allowed that special dispensation, and you can guess which five were at the meeting that day.*

Such inequities are sometimes corrected:

> *However, it's been my opinion that this is discriminatory, so this year's plan opens it up to all reservations, and it cannot be just Indians but all those residing on the reservation. That means that if there are non-Indians residing on the reservation, we have to serve them in the same manner. So it's for all federally recognized reservations rather than just those lucky five.*

However, while the most recent Title XX plan developed by the State of Washington permits the provision of free day care services for families living on reservations whose income does not exceed 80 percent of the state median, such day care for families living elsewhere is restricted to those families whose income does not exceed 35 percent of the state median.

Yet another consequence of the lack of an organized system in which interest groups are held accountable to each other is that at present there is no way to ensure that local concerns, judgments and needs assessments are adequately valued at the state level. One respondent whose agency had worked hard to elicit responses from a wide variety of local groups in developing their Region's Title XX plan for fiscal year 1978 was frustrated because the work had apparently been done in vain: "*In all we had 16 meetings. We sent all our stuff* *to Olympia on February 15. Someone from the state addressed a meeting of all the folks who had worked on our Region's report. He held up a copy of our report and said, 'We didn't even read this report. We went by last year's plan.' As it happened, what the state Title XX plan recommended for our Region was a lot like what we had suggested, but that didn't make us feel any better about the process."*

Somehow, these various efforts get put together into systems that seem to meet the needs of the state as a whole but the process is not a smooth one. While our respondents in Seattle were critical of one or more aspects of the way day care was delivered, planned for and regulated, they were reasonably satisfied overall with the way in which day care was provided and were confident that in time necessary changes could be made.

History of Day Care Regulation in Washington

In 1937 the State of Washington enacted a law giving the Department of Public Assistance the authority to license all those who provided child care four or more hours a day. Prior to 1940, only two other states had day care licensing laws.* Except for this pioneer effort, no other legislative action on day care was taken until the 1950's when the Licensing Act of 1937 was declared unconstitutional. It was replaced in 1951 by a much weaker act which "contained no penalties for operating without a license and exempted church-operated day care centers from any licensing whatsoever."** In 1967 new legislation was passed which enabled the Department of Social and Health Services (DSHS) to develop and enforce minimum licensing requirements (MLR's). These MLR's were revised in 1974 and 1975, and the current standards apply to all family day care homes, mini-centers and day care centers which care for children for four or more hours a day, regardless of sponsorship, and make it a misdemeanor to operate without a license.

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*Winifred Moore, "Some Aspects of Day Care Licensing at the State Level," New York: Child Welfare League of America, Inc., 1957, p. 8

**Seattle League of Women Voters, "Child Care: Pieces in the Puzzle" (Seattle, Wash., December 1974).

History of Day Care in Seattle

The first day care program in Seattle was the Seattle Day Nursery Association, organized in 1909 and incorporated as an agency in 1911. It was formed when the Reverend A. A. Matthews, then minister of the First Presbyterian Church, saw a need for child care in his community and organized the women in his church to do something about it. Their purpose was to take care of children whose mothers were forced to work because they had lost their husbands' support through death, desertion or illness. Later, support of the Seattle Day Nursery Association became a favorite cause of "society women"--primarily the wives of prominent businessmen. There was an elaborate hierarchy by which one could rise to the rank of president of the Association and to be such was a mark of high social status. Day care was seen as a charitable cause--to help women who and money to support the Seattle Day Nursery program was raised through charity balls, parties, teas, bazaars and the like.

During the Second World War, Seattle had approximately twenty-five Lanham Act Nurseries, which took care of children whose parents worked in the defense industries. These Lanham Nurseries were organized by the Seattle Public Schools. According to the COPA report,* "when as many as twelve or fifteen mothers in a neighborhood expressed an interest in going to work, Seattle Public Schools responded by securing a site in a school, church or other building and organizing a nursery with Lanham Act and State matching funds. Many women were from families new to the community recruited in other sections of the country to come to Seattle to work." The report adds, "it is worth noting that this program was related to the public school because the mothers working in war-time were thought to be 'normal,' not to have the 'problems' of working women of peace time."

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*Council of Planning Affiliates, op. cit.

All but one of these Lanham Act Nurseries were closed when federal funds were withdrawn, and it was left to the private sector to supply the day care needed for children whose mothers continued to work. Most of the day care provided for these children was in family day care homes or in centers run by churches or by the Seattle Day Nursery Association. Under the 1951 day care legislation, neither family day care homes nor centers sponsored by churches had to be licensed, so figures on the number of facilities actually in use are not readily available. When new legislation was passed in 1967 making the licensing of all day care facilities mandatory, the increase in the supply of day care could be more easily documented. In 1960 there were only 13 licensed centers in King County; their total capacity was 471 children. By April 1970 there were 70 licensed centers with a capacity of 3,004 children. It is the increase in the number of family day care homes that is the most dramatic, however. In 1965 it was estimated that there were "about 200 family day care homes." By July 1970, however, there were 1,531. As of 1975 there were 186 licensed day care centers and 1,821 licensed day care homes in King County. Sixty-eight percent of the centers and 57 percent of the homes are located within city limits.

Type of Day Care Preferred

The 1970 COPA report found that more than 50 percent of the working mothers surveyed preferred, and used, care either in their own home or in the home of a neighbor or relative.* Approximately 18 percent of the women used family day care homes, and 11 percent of the working women contacted through their homes and 15 percent contacted through their place of employment said that they used center care for their children. However, according to data gathered by the DSHS Day Care Referral Service, the type of care most preferred and most frequently used in 1974-75 was care in a family day care home, with nearly 90 percent of the families placing their children in such care. Care in a day care center was the second most frequently chosen type of care (7 percent), and use of in-home care had dropped to .34 percent.

The figures cited above do not include data on the total number of children currently enrolled in the various types of day care. "Using previous studies and 1970 Census data, it is estimated that there are 135,000 to 150,000 children ages birth to 17 in King County who have working mothers. Only 10 to 11 percent of these children are cared for in homes and centers licensed by the Department of Social and Health Services. The great majority of children are cared for in their homes, by a neighbor, or in a relative's home."** (Or as one respondent noted, "*they take care of themselves.*") What the figures do reflect are the trends among parents who are either using day care for the first time or changing their source or type of day care.

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* Figures are based on data collected by two questionnaires which were completed by 1,440 mothers currently working; 923 responded through questionnaires sent home by way of school children; 517 responded from seven different places of employment.

**Ruth L. Kagi, Draft Report of A Study of Need for Child Care in Seattle, prepared for the King County Council, 1976.

Day Care Referral Service

At present, parents, relatives or social service agencies seeking day care referral can contact the King County Day Care Referral Service, which is run by the Department of Social and Health Services. The caller is asked such things as the number and ages of children for whom care is needed, for what hours and which days, type of care preferred (family day care home, center or in-home care), and the reason why the parent needs care (working, in school and so on). The worker then gives the parent the names and addresses of three or four possibilities within the area requested. The caller is also encouraged to call back if things do not work out or if further referrals are needed. (See Figure 1, Sample Request Sheet.) The Day Care Referral Service does not make recommendations--the parent must decide what best meets her/his needs--nor will they tell the caller the race of the caregiver. The standard answer to questions about the caregiver's race is "*I have no way of knowing whether they are green, pink or purple.*"

At the Day Care Referral Service, there is a huge map of Seattle/King County, which is divided into regions and marked with colored pins indicating the location of family day care homes and day care centers within each region. Cards for each facility or caregiver are filed on rollidex files--one file for each region. Attached to each card are colored markers indicating the type of care provided, the days of the week when care is available, age range of children served (i.e., infant, preschool, school-age), and hours when care is available (including days only or nighttime). Centers and family day care homes needing additional children can also call the Referral Service to register their need. For these, yet another colored marker is then added to their card, alerting the workers to the need for additional children in these facilities.

Figure 1

REQUEST TO DAY CARE REFERRAL SERVICE

1. Date request made:__________ 2. Date care is needed:__________

3. Days care is desired: Mon. - Fri. only __________Some Sat. and Sun.__________
Too early to determine__________Worker unabel to obtain__________

4. Reason: Working__________In School__________ Child's Education__________
Looking for work__________Other (i.e., mother's medical, recreational)__________

5. Hours needed: Between 6:30 am and 6:30 pm__________Before or after__________

6. Preference: Center__________Home__________In Home Care__________
Part time preschool (i.e., Headstart, Cooperative)__________Don't Know__________

7. How many children need care?__________ 8. Ages___,___,___,___,___,___,___,___,___

9. How many full time?__________Part time?__________If applicable, add:
Before school only__________After school only__________Both__________

10. What transportation is available. Walking distance__________Has car__________

11. Special problems (i.e., emotionally disturbed, handicap, etc.)__________
(over)

12. To help us locate child care for you, please give us your exact address:
Name (if given)__________Phone__________
Address__________City__________Zip Code__________

13. Local office area: Bellevue__________Capitol Hill__________Kent__________
North__________Queen Anne__________Ranier__________Southwest__________

14. Referrals made to:

Centers	Home	15. Additional referrals after call
__________	__________	__________
__________	__________	__________
__________	__________	__________

In Home Care (i.e., proprietary agency of individual)__________

I'm sorry but we don't have a very extensive list. The following are baby sitter agencies. Also...(how to seek & references)

16. Identification of caller: Mother__________Father__________Agency__________Other__________

17. Comments__________
Please call back if more names are needed or you have problems.

18. Interviewer__________ DSHS______Yes______NO______

Information about the Day Care Referral Service is widely disseminated. It is listed in the Yellow Pages under Nurseries and Child Care. The Seattle/King County 4-C's list in it a brochure they mail out. Caseworkers know about it and refer clients to it. Welcome Wagon has a handout about the service, and there have been some public service spot announcements on radio and TV.

The Referral Service has been in operation for five years now, and the careful records kept on the number of calls received, types of care sought and actually chosen etc., provide a number of indicators about day care needs and trends. A summary of Referral Service activity is presented in Tables 1 and 2. (Because the need for such a service can be so clearly documented, not only has the Referral Service been fully funded each year but this past year another full-time-equivalent position was added to the Service at a time when other areas in the Department of Social and Health Services were facing cuts in staff.)

According to data from the Referral Service, the number of fathers seeking day care is gradually increasing (from 4.5 percent of calls in 1972-73 to 5.3 percent in 1974-75), but the majority of the callers are mothers--in 1974-75, 6,476 (87.5 percent) of the 7,396 calls were made by mothers. Reasons for seeking day care have consistently been related to employment: 5,000 out of 7,396 callers needed day care because they were working; being in school or training accounted for 1,057 of the requests; and 480 were looking for work.

Need for Additional Day Care

Various studies assessing the need for day care in the Seattle/King County area have shown that centers and family day care homes operate at anywhere between 45 and 80

TABLE 1

TYPE OF CARE REQUESTED

	Percentage			Number		
YEAR	'72-'73	'73-'74	'74-'75	'72-'73	'73-'74	'74-'75
HOME	unknown	80.64%	83.57%	unknown	5,709	6,191
CENTER	unknown	12.73%	9.49%	unknown	901	702
IN-HOME	unknown	3.42%	1.89%	unknown	242	140
OTHER	unknown	3.53%	5.23%	unknown	350	387
TOTAL	unknown	*100.32%	*100.15%	unknown	*7,102	7,410

TABLE 2

TYPE OF CARE DECIDED ON

	Percentage			Number		
YEAR	'72-'73	'73-'74	'74-'75	'72-'73	'73-'74	'74-'75
HOME	83.2%	86.87%	89.18%	4,994	6,115	6,596
CENTER	11.5%	9.65%	7.14%	692	683	528
IN-HOME	2.7%	1.45%	.34%	165	103	25
OTHER	2.5%	2.75%	3.58%	155	195	267
TOTAL	99.9%	*100.22%	*100.14%	6,006	7,096	7,407

percent of total licensed capacity; however, there is need for additional spaces for school-age children and infants. The discrepancy between underutilized facilities on the one hand and an unmet need for care for children other than preschoolers on the other is explained by several factors. First, estimates of utilization are based on total licensed capacity. The 1970 COPA study estimates that 30 percent of licensed day care spaces are unused. The study attributes this underutilization in part to the fact that some family day care home mothers have obtained licenses without knowing whether there was a need for such care in their neighborhood (302 licensed day care homes had no children in care). In addition, some day care mothers are encouraged by their licensing worker to be licensed for more children than the mother intends to serve. Second, some homes and centers are not fully utilized because of parents' dissatisfaction with the quality of care provided; and third, cost is a factor which prevents some working parents from using the day care facilities available.

Underutilization cannot be attributed wholly to licensing spaces in family day care homes which either the day care mother has no intention of filling or for which the community has no need. The COPA study also found that some centers in King County operated at only 50 percent of licensed capacity. Data from the 1976 "Red Study"--the Washington State Day Care Study, prepared by the Community Services Division of DSHS--showed that day care facilities in 10 counties and one Indian reservation operated at a 45 percent capacity (centers, 46 percent, mini-centers 43 percent, and family day care homes, 44 percent).* Cost, quality and local need for care may also be factors here, as could "self limiting of enrollment, exclusion of certain clients because of FIDCR and other reasons, and capacity usage during certain hours only." The COPA study points out that Head Start centers charging no fee and Seattle Day Nursery centers operating on a sliding fee scale are fully enrolled and that other centers and homes known to offer quality care are also fully enrolled as are centers located in communities known to have large numbers of working mothers.

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*State of Washington, Department of Social and Health Services, Community Services Division, Day Care Program Review, June 1976.

Working mothers contacted during the COPA study felt that the greatest need was for supervised activity for their school-age children--before and after school and during the summer months. It should be noted that the mothers interviewed had already made satisfactory day care arrangements for their children. However, the study estimated that there were a minimum of 2,900 school-age children with no arrangement for their care after school hours.

Professional social workers contacted during the COPA study maintained that the greatest unmet day care need was infant care. In 1974-75, 41 percent of the calls received by the Day Care Referral Service were requests for care for children under three years of age (see Table 3). The COPA study found that 51.9 percent of the 1,531 family day care homes licensed as of July 1970 were licensed to care for children under two years of age. However, the study estimated that these homes have the capacity to serve no more than 750 children under two because such homes are permitted to have no more than two children under two, including the day care mother's own children.

The supply of infant care available has not increased significantly in the years between 1970 and the present. In 1972, only nine of the 100 licensed centers were licensed to care for children under two and a half, and

TABLE 3

KING COUNTY DAY CARE REFERRAL SERVICE
Operated by the State of Washington
Data Collected from October 1974 through September 1975
(Third Full Year of Operation)

TOTAL REQUESTS FOR CARE

	No.	Percent
October 1974	656	8.87
November	511	6.91
December	385	5.21
January 1975	694	9.38
February	439	5.94
March	612	8.27
April	601	8.13
May	500	6.76
June	556	7,52
July	541	7.31
August	866	11.71
September	1,035	13.99
Total	7,396*	100.08

*4.46% increase in volume over previous year which had a 17.88% increase over the first year of operation.

GEOGRAPHIC AREA OF NEED

	No.	Percent
Bellevue (Eastside incl. Kirkland, Redmond, Mercer Island, Issaquah	781	10.56
Capitol Hill - Central Area	679	9.18
Kent, Renton, Auburn, Federal way	845	11.43
North (Ship Canal to Snohomish County line, (incl. Bothell)	2,450	33.13
Queen Anne - Magnolia	429	5.80
Rainier Valley, south to South 120	972	13.14
West Seattle, White Center, Burien to Des Moines	1,204	16.28
Other (i.e., Snohomish County, don't know)	36	.49
Total	7,396	100.01

SPECIAL PROBLEMS OR STRESSES MENTIONED

	No.	Percent
(CPS cases, physical handicaps, parents just seperated, etc.)	976	13.20

CALL BACKS FOR ADDITIONAL LISTINGS

	No.	Percent
	848	11.47

DAYS CARE NEEDED

	No.	Percent
Monday-Friday only	6,619	89.49
Some Saturday and/or Sunday	713	9.64
Don't know yet	49	.66
Worker unable to obtain	15	.20
Total	7,396	99.99

HOURS CARE NEEDED

	No.	Percent
Between 6:30am and 6:30pm	6,481	87.63
Before or after 6:30am and 6:30pm	842	11.38
Don't know yet	73	.99
Total	7,396	100.00

REASONS CHILD CARE NEEDED

	No.	Percent
Working	5,000	67.60
Looking for work	480	6.49
In school	1,057	14.29
Child's education	83	1.12
Medical	243	3.29
Recreational	380	5.14
Other	46	.62
Don't know or not recorded	178	2.41
Total	7,467*	100.96*

*60 parents both working and in school.
2 parents both working and needed for child's education.
2 parents both working & needed medical.
2 parents both working & needed for rec.
1 parent both working & needed for other.
1 parent both in school & needed medical.
2 parents both in school & needed rec.

IDENTIFICATION OF CALLER

	No.	Percent
Mother	6,476	87.56
Father	394	5.33
Agency	248	3.35
Other (Friend, grandmother, etc.)	248	3.35
Don't know	30	.41
Total	7,396	100.00

TYPE OF CARE REQUESTED

	No.	Percent
Home	6,181	83.57
Center	702	9.49
In-Home	140	1.89
part time Preschool	59	.80
Don't know	328	4.43
Total	7,410*	100.18*

*13 parents wanted home for one child and center for another.
1 parent wanted both a part time preschool and a home.

TYPE OF CARE DECIDED UPON

	No.	Percent
Home	6,596	89.18
Center	528	7.14
In-Home	25	.34
Part time Preschool	54	.73
Foster Care	2	.03
Don't know	210	2.72
Total	7,407*	100.14*

*10 parents used center for one child and home for another.
1 parent used both a home and part time preschool.

TRANSPORTATION AVAILABLE

	No.	Percent
Walking distance	3,306*	44.70*
Has car	4,007	54.18
Not applicable (i.e., in home care)	33	.45
Don't know	50	.68
Total	7,396	100.01

*Includes families with school-age children that need to be close to school.

NUMBER OF CHILDREN PER FAMILY

	No.	Percent
One	4,634	62.66
Two	2,253	30.46
Three	406	5.49
Four	69	.93
Five or more	28*	.38
Don't know	6	.08
Total	7,396	100.00

*5 callers had 6 children; 4 callers had 8 children.

(10,797 children)

AGES REQUIRING CARE

	No.	Percent
Birth to 1	1,500	13.89
1	1,478	13.69
2	1,379	12.72
3	1,245	12.53
4	1,190	11.02
5	1,277	11.83
6	904	8.37
7	683	6.31
8 to 11	1,036	9.60
12 and over	63	.60
Don't know	42	.40
Total	10,797	100.00

FULL OR PART TIME CARE NEEDED

	No.	Percent
Full time	5,141	47.61
Part time	5,625	52.09
Don't know	31	.29
Total	10,797	99.99

SCHOOL-AGE CHILDREN NEEDING CARE

	No.	Percent
Before school only	140	5.03
After school only	759	27.28
Both before and after school	1,883	67.69
Total	2,782	100.00

only five of these centers provided care for children beginning at one month. Four of these five centers cared exclusively for infants and toddlers, and the total number of infants and toddlers served by these centers was 87. A 1976 study done by the King County 4-C's reported that only 11 centers will accept children under one year of age old and only 25 centers will accept infants between ages one and two. Many of these centers serve only certain clients--e.g., students or employees. Most of the centers have long waiting lists. One respondent commented, "*A working woman who gets pregnant may just as well make up her mind to stay home with that child for several years.*"

The COPA study found that in 1970 42.4 percent of the family day care homes were licensed to accept both preschool and school-aged children and an additional 4.9 percent were licensed for school-age children only. When the study was conducted, licensed family day care homes had a total capacity for serving only 835 school-age children.

The 1974 revisions to the licensing requirements for family day care homes permit "the care of additional children for not more than three hours per child (to) be disregarded in the count of children for which the home is licensed, provided that the total number of children under 12 years of age on the premises at any given time does not exceed ten, and provided that when more than eight children are present or when any of the children are under two and a half years of age, the day care parent is assisted by a competent person who is at least 16 years of age." Whether or not such a provision will encourage family day care home mothers to accept a greater number of part-time children in addition to the number of children they prefer to serve on a full-time basis has not yet been clearly documented. However, in 1970, the COPA study found that the day care mother usually only accepted one or two school-age children, even though the home was licensed for a larger number.

Few centers offer before- and after-school care for school-age children, and those that do frequently limit such care to children previously enrolled in the center or who currently have siblings enrolled there. According to a 1972 report by the King County 4-C's, "only three day care centers care only for school-age children."* As is so often the case in Seattle, a private organization--the YMCA--has stepped in to help meet a community need, in this case, day care. One respondent saw this action on the part of the "Y" as an indication that *"institutions are changing in response to shifts in the social environment, are realizing that their programs have to become available to children whose parents are working."* In this case enlightened self-interest may provide the motivation whereas in other cases the motivation stemmed from concepts of charity, from a social service philosophy, or what have you. The motivation behind the act, however, is not what is important. What is important here is that once again when *"the demand gets so great . . . somehow a person or a group gets found to do it."*

We asked our respondents about the possibility of the public school system meeting some of the day care needs. Their reaction was that this would not be appropriate:

> *The public schools should not get into the provision of day care, save for the use of capital facilities. They should turn the facility over to private groups. We should encourage the use of facilities for community use--the day care community could unite on this. But the State Department of Education taking over would be opposed strongly. The school system is not particularly greedy and wouldn't try to get into day care.*

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*This includes as one center the Neighborhood House Activity Homes, King County Child Care Coordinating Committee, Care for Our Children: A Comprehensive Plan. January 1972.

> *The school system isn't into day care. Look, they stick kids out on the street at 2:30 when they know* ***parents*** *are working.*
>
> *I would say that those folks (the public schools) really are not prepared to take over day care; they don't know anything about young children. I think schools could do as good a job as some of the programs that are operating now. A lot of things would have to happen, though, if they were really going to do that. Now I have a strong bias about education and the fact that most of what people call education isn't education--most of what we call education is an adult's perspective of what they think someone should know. I therefore have philosophical problems with elementary schools and what they try to pound into kids. If that's all we want to do, we could educate kids differently, easier, and have a lot more fun doing it.*

In addition to the need for more day care for infants and school-age children, our respondents cited special populations for whom the supply of day care was inadequate. Few centers or day care homes are equipped to deal with physically or emotionally handicapped children, and some of our respondents felt that there was a need for more centers willing to serve children from severely deprived backgrounds. In addition, one respondent mentioned that few centers offered care at "odd hours"; she knew of only two centers--one run by a hospital and one run by a restaurant--which offered care for the children of their employees round the clock and felt that there was a great need for more child care during nights, weekends and vacation periods. Another respondent added that teenage mothers had a particularly difficult time finding child care so that they could continue their education. The 4-C's study found that, "although infant care is provided along with the Garfield School Age Parent Continuation Program, it was difficult or impossible for the girls to bring their infants through several bus transfers during foul weather (and) the girls in West Seattle at another program who needed infant care in that area found it impossible to locate."

Advocacy Groups: Who Cares for Day Care?

As mentioned earlier, Seattle is a city of ad hoc committees and temporary coalitions. Given this way of getting things done, Seattle has been particularly fortunate in the types of groups which have made day care a primary concern.

One of the earliest groups advocating day care was, of course, the group of church women that Reverend Matthews organized to do something about the need for child care. The "something they did" became the Seattle Day Nursery--an organization which not only provided child care but served as a resource for other groups interested in providing day care in other locations throughout King County. A similar force in both providing child care and leadership in developing additional child care programs has been Neighborhood House. Sponsored by the Council of Jewish Women, Neighborhood House started in 1906 as a settlement house. As Seattle changed, so did the programs run by Neighborhood House: from providing a reading room, and evening school and free public baths for immigrant families to providing tutoring and sports programs for youngsters, health clinics and meeting places for the elderly in the 1960's. Currently, in addition to its other programs, Neighborhood House has assumed a major role in providing and upgrading child care in Seattle. Both Neighborhood House and the Seattle Day Nursery were instrumental in implementing the Head Start day care program in Seattle: Seattle Day Nursery assisted in setting up a Head Start center at St. James Lutheran Church in southwest Seattle and the St. James Head Start Center is presently operated by Neighborhood House.

Both agencies continue to play important roles in day care advocacy. As the director of Neighborhood House

Child Care Services explains, *"We're beginning to feel like another of the endangered species and yet I think Neighborhood House, just by its aggressiveness and the agency's support of services to young families and young children has been tremendously effective in preventing the situation from being any worse than it is. I think at times when things look really bad we tend to be depressed and lose sight of the effects that we have had, but our approach has met the challenge of the times for seven years. There is no reason to believe that it will not continue to do so."*

Women's groups continue to play an important role in Seattle's day care community. The Junior League has been active in day care for many years, and in 1971 it made a two-year commitment of funds, to be matched by Title IV-A funds, to support the King County 4-C's. In 1974, the Seattle League of Women Voters produced a report on day care which summarized the history of day care funding and regulation both nationally and locally and outlined the areas in which work still needed to be done. In 1976-77, the Seattle Women's Commission focused on child care issues. Although the Commission had looked into child care issues off and on in previous years, members felt that they hadn't gotten very far and decided to focus on *"Child care as being one of the major factors that prevents women from becoming active citizens in all phases of life."*

Established by ordinance to advise the mayor and city council on the affairs of women in the city of Seattle, the Commission sees as its role *"to serve as a catalyst or facilitator, not the one to assume or continue a particular reponsibility but to get others mobilized in the community."* In that role, the Seattle Women's Commission studied the need city employees--primarily the clerical workers--had for child care; recommended that part of the sick leave be converted to sick child leave; developed legislation to organize all children's services into a single agency; and tried to get family day care homes to affiliate with various day care centers *"so that resources could be shared between the center and the homes which are probably limited in the extra kinds of resources like health and social services."*

The Commission's focus on child care spanned the year between May 1976 and May 1977. We interviewed a member of the Commission toward the end of June 1977 whose assessment at that time was: that the *"reception hasn't been all that exciting. We still have not heard a response from the city council or the mayor in regard to our recommendations about sick child leave. The results are not yet in on the survey of child care needs for clerical workers. . . . The legislation submitted didn't move out of committee, but they will have an interim study group, between now and the next session, to see how this legislation can be cleaned up, so it's not a dead issue. And we had a big uproar from the day care home mothers who in no way wanted to be affiliated with day care centers. They felt that their freedom and independence and so on would be restricted."*

Nevertheless, our respondent felt that the year had been a success: *"We've provided a focal point, gotton people together--they're speaking together. Legislation has been introduced; there's going to be a work-study group looking at it. And our role will be to keep that issue going until it's resolved. We'll keep addressing it, monitor its progress, and as needed support it, whether it be through letters to political people to convene sessions or calling people in to let them know what's going on. However, we are all tired. Child care was the high priority issue this year; I doubt it will be next year. I think what may become a priority is stereotyping in educational programs, in schools. And what we will do with the child care thing is that it'll still be an issue but it won't be the highest priority."*

One extremely important group on the day care scene has been the King County Chapter of the National Association of Day Care Mothers.* The headquarters of both the national and the local organization are located in Seattle. The Association functions as a combination support group/lobby/union steward for the day care provides in its membership. In the past it has provided training for day care mothers, gone to bat for its members when they are involved in altercations with DSHS licensors, suggested ways in which the monitoring of day care homes could be based on more uniform criteria, and has lobbied on day care mothers' behalf in various arenas. Current projects include the provision of group insurance for members and exploring ways in which family day care homes can participate in the U.S. Department of Agriculture's child care food program.

In the last decade, there has been another advocacy group on the scene in Seattle: the Seattle/King County Coordinated Child Care Committee (4-C's). It had originally been part of a much larger network of local 4-C's organizations under the direction of a Washington State 4-C's committee. The concept of the 4-C's program was developed by the Federal Panel on Early Child Care established under a congressional mandate in April 1968. The intent of the 4-C's program was to improve the coordination at the local, state and federal level of child care and child development programs. The program was never adequately or consistently funded on the federal level, however, and the survival of the various state and local 4-C's organizations depended on their skill in obtaining grants from various federal agencies, such as HEW, HUD and OEO, or in wresting funds from state and local social services budgets. The Washington State 4-C's was successful in winning a grant from HUD to provide assistance to Model Cities child care programs and to 21 local 4-C's. The grant was not renewed, however, and the state 4-C's was transferred to the Washington State Office of Economic Opportunity (WSOEO). In fall of 1972, the state 4-C's received another federal grant--this time to provide staff for the WSOEO Child Development Project. In response to yet another funding crisis, the Child Development Project was shifted to the newly formed State Office of Community Development where its role in "the coordination. . . . and promulgation of programs and services for all children and family units" was indistinguishable from that of the 4-C's. Loss of federal funding and failure to find state funding brought the Child Development Project to an end on June 30, 1975.

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*The name of this organization is now the Family Day Association of Kings County.

The King County 4-C's financial history has been somewhat happier. It received federal grants in 1970 and 1971 when Seattle was selected as one of 24 pilot communities and awarded the grants to develop its program. It has also received funding through Title IV-A and contributions of funds from such organizations as the Seattle Junior League and in-kind contributions from Seattle Central Community College. The Seattle 4-C's presently has a small office located behind the Child Care Resource Center at Seattle Central Community College and a paid staff of one. It relies, as it always has, on the volunteer efforts of its Board of Directors and general membership to share information about child care, serve as a focal point around which various other groups can coalesce in times of crisis, and act as an advocate for various child care needs and issues.

In the past, the King County 4-C's in conjunction with the Puget Sound Association for the Education of Young Children (PSAEYC) successfully spearheaded a drive to delay the imposition of the FIDCR-mandated staff/child ratios for day care centers serving federally subsidized children. (See the section on the Impact of Title XX below.) It has provided training for day care administrators and day care home mothers and planning assistance for day care programs, produced a paper urging DSHS to allocate funds for additional infant care, developed a guide for monitoring centers, and held hearings on day care needs in the region. In addition, the King County 4-C's has kept abreast of developments in various other groups whose interests overlap, albeit tangentially, with groups whose primary focus is day care. Among its current projects are continued advocacy for the need for additional infant care, the development of a health insurance program which will include family day care home mothers and the staff in day care centers, and the formation of a newsletter which will disseminate information and materials relevant to day care. It is hoped that the newsletter will help avoid the duplication of efforts--"*in day care, very often the right hand doesn't know what the left hand is doing.*" The newsletter feature information about the Seattle Child Care Resource Center, the Black Child Development Committee and the PSAEYC calendar of events.

This need for coordinating and combining the efforts of various day care groups has been a long-standing one--in Seattle as elsewhere. In fact, the King County 4-C's was preceded by a group organized by the Seattle Day Nursery. "In 1968, the staff of Seattle Day Nursery convened a group of professional people from the local day care field for the purpose of sharing information and attempting to coordinate day care services. This group had been meeting regularly for several months when it learned of the development of the Federal 4-C concept. The group then expanded to include representatives of such agencies as the Seattle/King County Economic Opportunity Board, Seattle Community College, and other parents and representatives. King County 4-C was incorporated as a private, non-profit organization designed to coordinate child care services."* That this need exists today is attested to by a respondent who explained that the King County 4-C's was selected as the sub-group designated to hold hearings on day care during the development of the present Title XX plan for Region 4. The selection was motivated as much by the need to support the King County 4-C's role as primary coordinator of day care services in the region as because they were the single most obvious group to hold such hearings.

> *We reinforced the position of 4-C's as the coordinator and planner for children in our county; we simply gave them that status and said 'you do the day care part, because we want to buy it, but you put it together.'*

Another significant need that 4-C's groups have traditionally served has been that of information and referral. (In Atlanta, whose 4-C's has only recently become defunct, it is the information and referral service that is most sorely missed.) The King County 4-C's was prime mover in the establishment of what is presently a thriving Day Care Referral Service run by DSHS. The Junior League was also an early sponsor of the Day Care Referral Service.

As originally planned, the Referral Service was to be set up by the 4-C's and Seattle Community College and staffed by volunteers supplied by the Junior League. Initial funding came from the Junior League, the 4-C's and in-kind contributions from Seattle Community College. These funds were matched with Title IV-A money under a contract with the Department of Social and Health Services. Then, as one respondent explained, "*DSHS decided that they were the most appropriate agency to run a Referral Service. There was clearly a need for such a service and they were the ones who could run it most efficiently so the Department said, 'No, it's our job and we'll do it.' And they have.*"

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*King County Child Care Coordinating Committee, Care for Our Children: A Comprehensive Plan, January 1972.

Although the Referral Service is adequately staffed and funded by DSHS, traces of the Seattle spirit of ingenuity surface from time to time: *"When the Referral Service first started, it was supposed to have been computer coded. It was taking forever to get the computer program set up, so I used volunteers and my family, and we coded the map by hand. It was quicker that way."* The Referral Service is, after all, a Seattle institution, and Seattle is a place in which people first look to themselves to get a job done and to agencies (or in this case computers) as a last resort. For every new day care facility, a worker sticks a colored pin into a large map of King County which is displayed on one wall; fills out a card, attaches the appropriate colored markers, and files it in the rollidex assigned to a particular area; and then returns to answer yet another call from someone seeking a day care referral. The Day Care Referral Service runs very efficiently and well.

The Day Care Referral Service is the single most concrete example of what the voluntary groups and the Department of Social and Health Services can achieve. Like Seattle Center and Pioneer Square, the Day Care Referral Service need no longer rely on the best efforts of ad hoc committees to support it. For other programs and services advocated by DSHS and/or by various private groups, the situation is much more fluid. Overall, the feeling on the part of respondents interviewed is optimistic: it may take a while; there may be many false starts and much fumbling around; but sooner or later, day care needs will be met--by a private organization, by the city, or by the state. A quotation from the director of Neighborhood House Child Care Services is applicable here: *"Our approach has met the challenge of the times for years. There is no reason to believe that it will not continue to do so."*

Day care communities in all three of our sites tend to be pretty much ingrown. Whether it is because people first met when their children were in cooperative nursery schools as is frequently the case in Detroit, or whether they met at meetings of the Title XX Director's Association in Atlanta or 4-C's meetings in Seattle, people in day care seem to know the other advocates on a first name basis. In Seattle, however, this tendency toward knowing everybody who is anybody in day care was particularly pronounced. For instance, the Day Care Program Review, a report officially issued by DSHS Community Services Division, was referred to, interchangeably, as "the Red Study" (from the color of its cover) or as "Judy's study." We were struck, too, by the informal division of labor among advocates, each of whom seems to focus on one particular aspect of day care, e.g., funding legislation, regulation. Very often one or another of our questions elicited a response of *"gee, I don't know--that's not my particular sphere, but 'so-and-so' would know. You should ask her."*

Despite the fragmentation of what does and does not lie in one's particular sphere--or perhaps because of it--it is possible for advocates, either singly or in a group, to have a significant impact on a particular policy or issue. There appears to be relatively little in-fighting among the different day care groups and agencies. Instead there is an apparent willingness to cooperate--or at least not to set up roadblocks--when a group of persons wants to coordinate the various parties around a day care issue. On the other hand, day care advocates have been most successful working on the local level or with an individual agency; they have been less successful with the legislature where their impact has been inconsistent. Day care is not a priority issue among legislators, most of whom apparently have grave reservations about mothers who work for whatever reasons. Several respondents felt that there was a great need for a consistent lobbying effort to bring day care needs to the attention of the lawmakers.

State and Federal Role in Day Care

Until 1967, the State of Washington assumed responsibility primarily for the regulation but not the subsidization of day care throughout the state. With the exception of the World War II period when state-organized Lanham Act Nurseries channeled federal funds into support of child care for children of parents working in defense industries, the state rarely paid for day care except when it was used in lieu of placing a child in foster care. Official concern about what happened to children whose parents worked was expressed in the form of legislation passed in 1967 which permitted the Department of Social and Health Services to develop and enforce minimum licensing standards for day care facilities. However, the state's role in providing day care was limited to using day care as a form of children's protective services and not as a method of enabling parents to work or receive training.

When the Federal Social Security Act was amended to provide three-to-one matching of state funds to pay for day care of children whose parents were past, current or potential recipients of public assistance, the state's role gradually changed. With federal funds facilitating the transition, the state began to participate in subsidized care for children of working parents whose income fell below the welfare-grant standard. In addition to federal funds available through Title IV-A of the Social Security Act, federal funds were also available for day care associated with Head Start (1965), the Work Incentive Program (WIN, 1967), and the Model Cities Program (1968). "In July, 1964, the monthly budget for providing child care by the DSHS was $640; by July 1974, the monthly budgeted sum was $639,837."*

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*Seattle League of Women Voters, op. cit.

Prior to July 1, 1969, the state paid the costs of day care directly only for families participating in the WIN program. These families received a voucher for their day care costs. For non-WIN AFDC families, day care was subsidized through the income disregard provision: when the basic AFDC grant was being determined, the family's day care expenses were deducted from earned income before the basic grant was computed. Title IV-A funds were used to pay the grant.

As of July 1, 1969, DSHS began to pay vendors directly for day care costs incurred by "current, former and potential" AFDC recipients, both WIN and non-WIN. "Eligible 'former' and 'potential' AFDC recipients were defined as (a) single-parent families; or (b) two-parent families with one or both adults disabled, or two-parent families approved on an exception basis."* At this time a plan for having parents participate in the cost of day care for their children was also established. Initially, parents participated in paying the costs of child care if their gross monthly income exceeded a certain amount determined by their family size. The amount ranged from a gross monthly income of $430 for a family of two to a gross monthly income of $805 for a family of ten. This system of federal and state subsidies in combination with a sliding fee scale for parents was used until October 23, 1975, when day care funds were allocated from Title XX monies rather than from Title IV-A funds. During the period between 1969 and 1975, the maximum amount DSHS would pay (both the maximum daily rate per child in a family and the maximum total monthly amount per family) increased gradually and the cut-off points at which families had to participate in the costs of day care became more and more stringent. Table 4 shows the fluctuations in what the Department would pay and when parents had to contribute between July 1, 1969 and October 23, 1975.

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*Community Services Division, Department of Social and Health Services, op. cit.

During this same period, funds allocated by the state for day care escalated rapidly. Between fiscal years 1970 and 1971, child care costs increased by two and one-half million dollars--an increase primarily caused by the inclusion of "former" and "potential" AFDC recipients into the category of those eligible for subsidized day care. Day care costs continued to increase from fiscal year 1972 through fiscal year 1975 at a rate of approximately one million dollars each year. Whether or not this increase represented a corresponding increase in the numbers of children served by subsidized day care is not clear. The Day Care Program Review says, however, that "data on the size of caseloads and number of children served became available for FY 1973 and showed the caseload remaining stable although day care cost continued to rise."

Regardless of whether the increase in costs represented an increase in the number of children served or simply reflected an increase in the per-child costs of day care and associated expenses incurred in licensing and administering day care programs, our respondents all mentioned the problem of how to allocate resources among competing social service needs.

> *I'm sure some key people would say that we shouldn't be spending as much on day care. They're not malicious folks--they just think there are other things that are more important. And I agree that food on the table and housing are more important than day care, but when you get past the basics, then I feel that day care should be given priority.*

TABLE 4

Parent Participation

Family Size	Gross Monthly Income
2	$ 430
3	515
4	570
5	610
6	650
7	690
8	725
9	765
10	805

Effective July 1, 1969

Family Size	Gross Monthly Income
2	$ 355
3	416
4	466
5	504
6	543
7	576
8 or more	600

Effective August 23, 1971

Rates of Payment (Out of Home Care)

Effective Date	Number of Children per family	Maximum Rate per Day	
July 1, 1969	per child	$5.00	
May 25, 1971	first child	5.00	
	second child	4.00	
	third child	3.00	
August 23, 1971	first child	5.00	
	second child	4.00	
	third child	4.00	
January 1, 1974	first child	5.31	
	second child	4.79	
	third child	3.26	
March 16, 1974	per child	5.31	
May 24, 1974	first child	5.17	
	second child	4.81	
	third child	4.31	
July 1975	first child	5.70	Maximum monthly payment/family= $285.00
	second child	4.17	
	third child	4.63	

> *There's still some major conflict between budget people and program people. Budget people like to see the money going for as many things as possible, and program people want to see it go to day care. The budget people heretofore have been much more influential with the powers-that-be than the program people.*

Other issues affecting the way in which resources are allocated for day care revolve around two basic questions: what is the primary purpose of day care, and what clientele should be served.

In Atlanta, debate about the primary purpose of day care revolved around whether or not social services were an essential component of quality care. In Detroit, the debate centered on whether an educational program or a "warm-fuzzy" environment is most important to quality care. In both of these cities, respondents universally agreed that *"well, of course, day care is primarily work-related,"* but they then moved quickly to discuss the need for social services or educational programs. In Seattle, however, the debate is "stalled" on the question of whether women ought to be encouraged to stay at home with their small children.

> *Legislators don't understand that day care has become a necessity--its no longer 1948. They're not even aware that 43 percent of the workers are women. Their attitude is 'well, we waited to have children until we were able to stay home to take care of them.'*
>
> *Some people have said that day care is a service for working parents; others have said, 'No, we should have day care for the good of kids and not just because the parents are working.' And others have said, 'We shouldn't have day care anyway because mothers really ought to be home taking care of their kids; that's the American way.'*

Not only is there ambivalence among legislators and some state agency staff about whether mothers should be encouraged to work or encouraged to stay home, but there is ambivalence also about which services it is appropriate for the state to provide. States have traditionally accepted the responsibility of providing public education, reluctantly accepted responsibility for providing the needy with food, clothing and shelter, and have been very slow to accept responsibility for supplementary social services such as health care and counselling. In Washington, legislators and state agency personnel appear to be very uncomfortable about the appropriateness of the state's providing welfare and social services.

> *It is easier to get money for education than for welfare. We'll never get enough money through the legislature on the welfare model for quality care. Legislators think that parents ought to be responsible for the health and welfare of kids.*

With such fundamental questions still unresolved, it is not surprising that there is little energy wasted debating such secondary issues as educational content or social service components of day care programs.

The issue of what clientele ought to be eligible for subsidized day care depends, of course, on how the purpose of day care is defined. If day care is seen as *"an unavoidable necessity for children whose parents are forced to work,"* then it may stand to reason that subsidized day care ought to be provided only for the poorest of the poor. While there are some who argue that the state ought to provide day care for educational or socialization reasons and ought to provide it to as many children as possible, such arguments seem to run counter to the prevailing philosophy that the state ought only to be the court of last resort. Washington's policy has been to provide subsidized day care only for those on AFDC or whose incomes do not exceed the AFDC standard. That policy did not change when day care funds were switched from Title IV-A to Title XX in October 1975.

Although the eligibility level for most social services under Title XX is set at 80 percent of the state median income (SMI), eligibility for free day care is set at 80 percent of the SMI only for those families living on Indian reservations. For other families, the service is limited to those whose income is 35 percent of the SMI or lower. A majority of the families at the 35 percent level are receiving AFDC benefits. However, there is a fairly large group of families who choose not to receive such benefits even though they are eligible for them.

> *Some people just want some form of day care. They don't want to be on welfare. All they want's a little bit of help.*
>
> *. . . the AFDC parent entering employment or training has a distinct advantage over the non-recipient requesting help with day care cost. The working AFDC parent with two children can earn up to $800.00 in wages, still draw a grant of assistance and have the full cost of day care met by DSHS.*

The way the Title XX system is set up in Washington has been criticized because it provides a strong economic disincentive for both recipients and nonrecipients to work at anything other than a dead end job (see Table 5). A small raise in pay could result in the loss of the $145.00 that is the average monthly day care grant. Only a small percentage of the AFDC caseload is affected by these disincentives, however. A DSHS study reported that "caseload statistics show that 89 percent of the AFDC total caseload do not avail themselves of DSHS day care subsidy. There has been no significant increase in the number of grant recipients reporting earned income since July 1, 1973, to the present

TABLE 5

Comparison of Grant-Recipient Working Mother
With Two Children Vs. Non-Recipient Working
Mother with Two Children*

	Grant Recipient		Non-Recipient
Monthly Gross Earnings	$315.00	$790.00	$315.00
30 1/3 Work Incentive	-125.00	-283.00	0
Mandatory Decutions	- 69.30	-173.00	0
Transportation and Clothing	- 20.70	- 20.70	0
Base for Grant Determination	$100.00	$312.50	0
Grant	215.00	2.50	0
Monthly Gross Earnings & Grant	530.00	792.50	315.00
Average Day Care Grant	145.00	145.00	145.00
Total Financial Resources Available	$675.00	$937.50	$460.00

*Data taken from Community Services Division, Day Care Program Revies, Department of Social and Health Services, June, 1976.

time."* Thus the majority of AFDC parents are at home with their children. The study could not determine whether the AFDC parents were at home by preference, because they were not able to locate jobs, or because they could not find child care that met their needs.

Limited resources are the primary factor behind the way in which day care funds are allocated under Title XX. When Title XX was implemented, Washington was already close to the ceiling permitted under the federal legislation. Philosophical preferences toward having mothers remain at home with preschool children notwithstanding, a significant percentage of the Title XX social service budget has been allocated each year for day care (Table 6).

Table 6

	FY '74	FY '75	FY '76	FY '77
Protective Services	16.4%	17.8%	4.9%	2.3%
Substitute Care	9.8%	10.6%	6.8%	17.4%
Adoption	.8%	.9%	.7%	.7%
Home-based Services	1.7%	1.8%	4.4%	2.0%
Day Care	14.9%	12.1%	16.1%	9.9%

At the time of our interviews (June 1977), the state was planning to alter the way in which day care funds were distributed. As of July 1977, day care for children of employed AFDC recipients was to be funded through Title IV-A rather than through Title XX. Thus once again day care would be a work-related expense for these families and would be disregarded as income when determining the basic AFDC grant. Also, as of January 1978, the state was going to implement a parent participation schedule under which parents with incomes between 38 and 50 percent of the SMI would pay 50 percent of their children's day care costs. Title XX funds and unmatched day care funds available through Public Law 94-401, a subsequent amendment, would be used to provide free day care for families with incomes less than 38 percent of the SMI and to pay 50 percent of the day care costs for those parents with incomes between 38 and 50 percent of the SMI.

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*Community Services Division, Department of Social and Health Services, The Washington State Day Care Program Study, June 1976.

The majority of our respondents appeared to be unaware of the proposed re-institution of a sliding fee scale, although several mentioned that such a fee scale was sorely needed and many were unhappy that the $3.2 million per year allocated under public law 94-401 had not been fully used the previous year. This federal windfall had taken the Department of Social and Health Services by surprise and not all of the funds available were used:

> *This year we really messed up. Day care wasn't together at all, so I don't think we used it all. What happens is that 94-401 is 100 percent federal funds earmarked for the expansion of day care services. The Department will claim the 94-401 funds first, and then they will have Title XX money available as well.*
>
> *All last year we kept data on spending for day care. Out of a total of nine million dollars available, they underspent by one and one half million.*

Respondents in Detroit and Atlanta reported that, in their states, funds authorized under Public Law 94-401 were used, essentially, to replace day care funds which normally would have been allocated under Title XX.

Title XX funds would be added as needed to maintain the normal level of funding for subsidized day care but the infusion of the additional funds would not have the effect of expanding the day care services available. Although it seemed that Washington's institution of the parent participation schedule would increase the amount of subsidized day care available to families, one respondent told us that there has been little or no increase.

Our respondents were apparently not aware of the proposed parent participation schedule to be implemented in January 1978, but they were very much aware of the planned switching of day care support for employed AFDC recipients to Title IV-A. A major concern was that day care providers would not accept children from these families for fear that the families would not pay: *"Vendors are worried that because these families have so very little money available to them anyway that an emergency will come up and the money meant for day care will be spent on other things."*

A second concern was that because the parents would be paying for day care directly and because they had so little money to begin with, *"they would put their kids into unlicensed facilities where it's cheaper. And we (state agency) people) can't do anything to stop them." "It's regressive in our minds; we used to be there. A lot of kids will be 'latch key'--left alone; we'll need more children's protective services. There'll be a lot of fraud and no way to catch it."*

Concern that parents will purchase care in unlicensed centers appears to be valid. We asked a representative of the Department of Social and Health Services about these two concerns: *"No doubt, care will be given in facilities that are not licensed, and we will pay for care in unlicensed facilities. Title XX has a regulation that no money can be spent on facilities that are not licensed. But under IV-A the requirement is* *that we pay for actual expenses reasonably attributed to the earning of income. Parents find their own care and pay for it, and then we reimburse the parent. But they can find care anywhere. That's where there's a strong possibility that some people may find care in unlicensed facilities or say, 'I have some kids and I need someone to take care of them, so I ask you as a neighbor to come over and take care of my kids. I pay you for that; I get paid for paying you.'"*

On the whole, our respondents were sympathetic with the dilemma the state was in. Although they want to see eligibility levels expanded, they were well aware that there were limits to that expansion: *"Only 12 percent of the AFDC parents are working because the eligibility levels are so low. Now they are changing these people over to Title IV-A. They will move all those people over to IV-A before they raise the eligibility levels. But once that gets into place, we will be paying higher rates and then people will really yell. The state can't go up to 80 percent (of SMI) on a sliding scale and then find 2,000 on the waiting list. Right now we're just hoping to keep the $9 million. We ought to spend all of what we get before we ask for more."*

Impact of Title XX

Although Title XX had an immediate impact on the way in which the state used day care funds, reactions to this law in Seattle, as in the other two sites, also focused on the incorporation of the Federal Interagency Day Care Requirements (FIDCR) as funding requirements for day care services. Facilities receiving Title XX funds were required to comply with the provisions of the FIDCR, and some providers took strong issue with one of those provisions, the mandated staff/child ratios.

Reaction to both the FIDCR and Title XX appeared to be much more intense and better organized than similar reactions in the other two sites. In Seattle, day care advocates may only coalesce around a crisis but when they do the results are impressive.

> *In the beginning we really geared up. The 4-C's were among the major gearer-uppers: holding public information meetings, and putting a great deal of energy into organization of parents and day care centers. We were very effective--writing letters, campaigning, contacting the media, using newspapers and TV and staging a rally of about 100 people. We held things (i.e., full implementation of Title XX) off from September until spring, in spite of the loss of Title IV-B target area contracts. Title XX did not pick up the IV-B target area contracts.*

Although the day care community protested the loss of the sliding fee scale--or the parent participation schedule as day care people there prefer to call it--they soon realized that their effect would be limited:

> *We sure used the eligibility level. FIDCR's idea was 70-80 percent of the state median income. That's one thing people really took off and used--the eligibility that came down from the fed's and the income scales. It was a bargaining point. We started there realizing that we weren't going to get all that.*

Title XX and FIDCR are, in the minds of most people, inextricably intertwined. For instance, in the quotation cited above, the 80 percent eligibility level was attributed to the FIDCR, which only address standards for day care facilities and which do not set forth eligibility standards.

The FIDCR component receiving the most attention was the one establishing staff/child ratios. The staff/child ratios set forth in the FIDCR are more stringent than those established by the State of Washington. Washington requires a minimum of two adults in attendance for each age group but permits a staffing ratio of 1:5 for infants from one month to one year; a ratio of 1:7 for children one year to 29 months of age; and for children 30 months and older, a ratio of 1:10 to up to 1:15. Equivalent FIDCR ratios are 1:1 for children under six weeks, 1:3 for children under three, 1:5 for three-year-olds, and 1:7, with the 1:7 ratio not reached until the children are aged four to six years.

The King County 4-C's and other groups came to the fore to protest FIDCR staff/child ratios as well as the way in which the state had decided to set eligibility levels. The Puget Sound Day Care Directors Association and the Tacoma Association for the Education of Young Children drafted a joint resolution which stated that the FIDCR would "greatly increase operating costs for providers, which will then have to be passed on to consumers and taxpayers; . . . will double the cost of day care and most consumers will not be able to purchase day care services under these unrealistic FIDCR requirements; . . . will also cause de facto segregation by the unavoidable grouping of welfare children in government-financed day care programs": and, whereas the increased staff and other services (required in the FIDCR) will not necessarily produce better quality day care for children, therefore be it resolved that the implementation of FIDCR be delayed until October 1, 1976 and . . . during the current year that FIDCR be re-evaluated by appropriate agencies and persons providing and purchasing day care services and . . . that pressure be directed to Congress and the Secretary of H.E.W., Washington, D.C., to delay implementation and initiated re-evaluation of FIDCR."

The views of these groups were shared by the Alliance of Children's Advocates for Washington State, a group organized in response to both Title XX and the FIDCR. Children's Advocates protested in particular the impact of the initial Title XX plan on eligibility: "The opportunity to broaden the availability of services to working poor families by means of a reasonable fee schedule was abandoned, with the final plan incorporating a hodge-podge of eligibility schemes, some of which--in particular, the scheme for day care--representing a regression from the previous year."

The concerns expressed in Seattle about the outcome of enforcing the FIDCR did not differ from the concerns expressed by respondents in our other two sites: "*the state will have to monitor three or four different systems;*" "*Title XX kids would be segregated into centers, and the centers would have to get extra funding, probably from the state;*" and "*vendors just won't serve Title XX kids.*" Two of our respondents claimed that thirteen centers and between 60 and 70 family day care homes closed down as a result of the FIDCR and Title XX. A third respondent questioned these numbers, suggesting that the facilities which closed were probably only marginally profitable operations for whom the new regulations provided the "last straw."

In response to similar opposition across the country, the FIDCR staff/child ratios for children under six years have been suspensed, since October 1975, by successive amendments to Title XX. The requirement for an educational program set forth in the original 1968 FIDCR had been incorporated as an "optional" standard in the Title XX legislation. The Department of Health, Education and Welfare is currently considering the appropriateness of the Title XX FIDCR, and the ultimate outcome of these considerations is presently up in the air. Revised regulations coming out of such deliberations may come closer to what it is that the day care community in Seattle sees as being appropriate and essential.

Our respondents predicted that there would be a "huge outcry" if FIDCR staff/ child ratios were enforced and that there would be economic segregation of children.

> *I just don't know . . . I think that it's likely that the centers will become like Atlanta as a result of this switch. I think that some, like Seattle Day, will be taking more poor kids and others won't take any at all. Because there's already this fear that if they have any federal money coming in, they'll have to meet the FIDCR. This may just be the last straw in taking any federal kids.*
>
> *Already family day care homes almost prefer not to take Title XX kids because they don't like to wait for payment from the state, but centers prefer to have their payment assured and, while they don't like the 15th of one month to the 15th of the next schedule of billing, they are very worried about the switch from Title XX to IV-A.*

Somewhat ironically, perhaps, the FIDCR presently seem to be viewed in a much more kindly light. While certain of the FIDCR components such as staff/child ratios, the provision of social services and the requirement that parents participate in policymaking for their day care center continue to be questioned, respondents liked the idea that standards similar to the FIDCR might ensure quality care and the FIDCR could be used as models or guidelines for the development of revised state standards:

> *The vagueries of going to FIDCR have made things stagnant. In this sense, the FIDCR have deterred from quality care. . . . The FIDCR were premature especially in macho Seattle. Now we're just about ready to make that big step into quality care. And we could use them (as goals).*
>
> *Providers and consumers alike cling to the FIDCR because it's the only standard they have to force at least a minimum for a state. They're afraid that if it goes, then the states will lower their actual standards for any part of care: staff/child ratios, health standards, the whole bit.*

What Constitutes Quality Care?

Many of the questions we asked respondents focused on the various components thought to make up quality care, such as staff/child ratios, type of program offered, staff qualifications and training, provision of social services and the need for parent participation. While all of our respondents had opinions about how necessary each of the above components were to a "good" program, in Seattle, as in the two other sites, no one was ready to hazard a hard and fast definition of "quality." They felt that there were just too many exceptions--and that so much depended on specific configurations of many different factors--for an overall rule to be made. One respondent exclaimed when asked to state what she felt constituted quality care, *"That's your study. You tell us!"*

Some of our respondents outlined what they considered to be the parameters of quality in day care:

> *Health and safety standards out to be met, and there should be a decent nutritional program. The environment should be stimulating--no TV's. . . . Partly it's the physical environment: there should be a soft mat or chair to flop on, and there should be some cuddling.*
>
> *Quality day care means nurturing, particularly for younger children. There should be consistency in caregivers and predictability in environment. You should look for all that more than physical surroundings. Look for warmth. There should also be varied experiences--changes of scenery and field trips, especially for low-income groups. Caregivers should have a working knowledge of the developmental process. It's not enough to have the intellectual knowledge if you can't put the day-to-day together with that intellectual knowledge. Day care programs should be building a child's self-esteem--that what comes from him is valuable. Quality day care is a nurturing process.*

One respondent's reply to our question of what constitutes quality day care seemed to capture the essence of Seattle: *"If you are rating the quality of care, look for warmth first, and health and nutrition standards second. After those basics, look at what's the goal of the center--art? music? reading" Then look at how well does the center do it."*
a people-oriented city, and people's basic needs must be taken care of--by the state, if no other group can be found to ensure that those needs are met. Seattle is also a city of diversity. Different groups may have different needs, so ask first what additional needs a program is tryng to meet before evaluating how well those needs are being met.

Day Care Regulation

Respondents were also asked about state and federal regulations: whether the way in which they were written, applied and enforced ensured quality care. All agreed that the state licensing requirements were *"just about where everybody is right now"* in terms of those standards which have to be met in order to ensure a minimum level of care. A few respondents pointed out that *"ten years ago. there was a big fight about the education that staff should have--a fight pretty much between people associated with proprietary and non-profit centers. People working in proprietary centers thought that the education requirement (that directors have 45 credit hours or their equivalent in early-childhood-related courses) was unrealistic for what's out there because most women in busine-s don't have more than a high school degree."* However, that requirement is no longer contested, in large part because the day care providers not only went out and got the necessary training but asked for more.

Others took issue with the fact that the minimum licensing requirements only *"concentrated on the physical aspects"* of care and thus did not ensure what these respondents considered a quality day care program. However, most would that just as there are "*minimum licensing requirements for restaurants so that we don't have to go see what the kitchen looks like to see whether there's a dirty sponge in the soup pot, we should also have absolute minimum standards for child care in the state.*"

Still others pointed out that the problems lay not so much in the standards required but in the time alloted for compliance: "*Changes in Title XX eligibility and in the fire regulations came so fast and at the same time that we were not given enough time to get all this into compliance at once.*"

Clearly, the major issue associated with the state licensing standards was the way in which they were enforced:

> *The state standards if they are met ensure quality but there are not enough licensors and monitors to do this.*
>
> *I have no problem with the standards but I do have a problem with the monitors.*
>
> *Licensors should not be so negative--so nit-picking.*
>
> *Licensors come out and look only at the holes in the fence, not at the fact that there is a fence in the first place. They think that they are only good as a licensor if they have found something wrong.*
>
> *The state standards can ensure quality by raising the standards of unlicensed facilities, but it's only after the fact. A parent puts a kid into care and asks us to pay the bill. Before we write the contract, we check on the facility to see if it meets our standards. If it doesn't, then we work iwth them to upgrade their program. But it's only after-the-fact. We just don't have enough staff.*

Insufficient staff for licensing and monitoring is a chronic issue in Washington. The caseload is high, regardless of whether the worker deals primarily with families needing services or with facilities to be monitored. The problem is particularly acute when it comes to working with family day care homes. While a worker can cope reasonably well with the more structured conditions in a day care center, the value judgments required in working with a family day care home can at times be overwhelming. Unfortunately, it is here that problems of maximization of staff time and marginal utility come into play. Although family day care homes continue to proliferate in Seattle, each homes serves--in general--only six or fewer children. Thus the question arises of whether a worker should devote many hours to working with a family day care home in order to upgrade conditions there and make things better for the few children enrolled, or whether the worker should devote those same hours to working with the staff at a day care center and, by doing so, improve conditions for many more children.

The problem is further compounded by the fact that in a family day care home the environment is extremely fluid. In a day care center, the staff operate under a consensus--this is the way things are done here--and the situation is much more formal in the sense that the center is a place in which the staff come to in order to work. It may or may not be their responsibility to see that the rug is vacuumed but at least they don't have to face that rug at night when the children have left. In a family day care home the lines are far less clearly delineated between what is "job" and what is "personal"--and much of the appeal of family day care homes lies in just such fuzzy delineation. Thus it is that after checking to make sure that the day care home provider is complying with enrollment and safety standards, the caseworker must evaluate the quality of the care based on his or her personal views on what is an appropriate blend of "professional" and "personal." When these views differ from those of the day care provider, the caseworker's judgment regarding noncompliance is frequently challenged.

Although both day care center directors and family day care home operators told us that they had problems with just such value judgments by day care monitors, the day care home operators have apparently been more vocal about their oppostion to seemingly arbitrary decisions about what constitutes an adequate day care program. For the most part, the examples cited focused on situations involving family day care homes. Our respondents told us about a day care worker who visited a home, asked permission to go upstairs to use the bathroom and returned downstairs with the question, "Why are there men's shirts hanging in your closet?"; who objected to the fact that a potty chair was located in the livingroom of a day care home serving a group of two-year-old children when "the bathroom is upstairs and that's where the potty chair ought to be too"; and who tried to revoke the license of one day care mother on the grounds that she was unfit because she breast-fed her own infant in the presence of the other children in the house.

In another case, a worker attempted to revoke the license of a family day care home on three grounds--a loud voice, the operator's cat's behavior, and unwashed lunch dishes. *"The woman had a father who was going deaf and I suspect that her hearing was somewhat impaired as well, so she talked louder than was necessary to me and to all the children. It was a manner of speaking that we could all accommodate to and it would be like discriminating against a handicapped person to say that she didn't have the right to speak loudly. She was not speaking harshly; she was speaking in a higher decibel--much different from yelling at a child. She had a family room adjacent to the kitchen, and the cat drank out of the fish tank. My cat has water by its feeding dish but still prefers the fish tank--you know, fishier water is better if you're a cat, I guess, and I never knew it was such a vile thing to happen. But she put that down as one of the reasons she was cancelling her license. And the third thing she put down was that when she came during the lunch hour--it was lunch time and the mother had just gotten all the kids down--there were dirty dishes in the sink and the family day care mother had the audacity to be watching television."*

This case was challenged by the family day care home provider. In the court proceedings which followed, several members of the Family Day Care Mothers Association testified on her behalf--"*we've known her for a long time and she was part of the Association, too. The licensing worker mysteriously got transferred in the middle of the hearing and she's no longer in day care. She's the one who was complaining about the breastfeeding and obviously needed long ago to have been transferred.*" The day care mother continues to be licensed but "*she had to get an attorney and it cost her $600 to go through the hearing process. You can't go around hiring attorneys for $600 to defend your right to make a living.*"

As mentioned earlier, the problem of licensing/ monitoring workers making what are essentially value judgments independent of mutually agreed upon standards affects day care centers as well as family day care homes. There was concensus among our respondents that the solution was, primarily, to train licensing workers in the fundamentals of early childhood development and, secondarily, in the development of a standardized checklist covering those items which most day care people felt were essential to ensure a day care program of at least minimum quality. For the latter, our respondents argued that possible inequities in enforcement could be better dealt with if facilities were judged on similar grounds, and to this end several proposals have been made. The King County 4-C's developed a proposed monitoring plan for day care centers which involved four visits from a licensing worker--each visit addressing a specific aspect of day care. The Day Care Mothers Association has participated in workshops and meetings in which the problem of evaluation of day care homes has been discussed. At least one member of the Association would like to see a method developed in which licensing/monitoring workers were evaluated on a yearly basis by those they regulated, and several members felt that workers' decisions ought to be regularly reviewed by supervisory personnel so that in individual cases the expense of a fair hearing or of having to go to court can be avoided.

The need for training of licensing/monitoring workers is not challenged by those in charge of regulating day care facilities. Not only are they aware of the problem but they have also taken steps to provide the necessary training:

> *I've got some major problems with what those folks know and what they don't know in terms of our own staff. We as a Department tend to give people assignments whether they know anything about the job or not. My guess is that a whole lot of them don't know what a good family day care home looks like or what a good center looks like. . . . However, we have a training plan worked out--I just worked on it yesterday afternoon--and Central Washington State College in Ellensburg is putting together a package for training of agency staff in child development and in business aspects of day care.*

Staff/Child Ratios

Because the Federal Interagency Day Care Requirements (FIDCR) are not being enforced, few of our respondents knew little more than that the FIDCR include stringent staff/child ratios and mandated parental participation on the governing boards of day care centers. We asked a representative from the regional office of the Department of Health, Education and Welfare to assess the reaction states in Region X would have toward the FIDCR as they are presently written:

> *I think the staff/child ratio looms as large as it does because that's the biggest expense the provider has and that's waht keeps making the rates go up and up and up. So states are going to fight it because that's where the dollar is. I think states are committed to the fire and safety regulations. I don't think they're committed to parent involvement whatever. They're committed to nutrition services and also to health services but then they ask where should health services be provided--in the center or at a clinic?*
>
> *I think there are problems with every one of the regulations and part of the problem is that they have never been objectified so no one really knows what the FIDCR means. . . . The only way we can really sell day care as a federal program with federal standards is to make those standards more realistic. They have to be stated in understandable language so that they can be monitored not only by the state but by federal government without people arguing about the interpretation of this word or that word. There also has to be a national public policy that includes funding. Until we have some of those things, I don't think states are going to buy much of anything. Instead they will pull day care out of Title XX.*

Although the FIDCR staff/child ratios were opposed on the grounds that they were too costly and that increased staff did not automatically ensure better quality day care, the question of what would be appropriate staff/child ratios did not receive the same reaction from respondents in Seattle as it did in Atlanta. Respondents in Atlanta had strong feelings about the positive and negative effects of various staff/child ratios, particularly for infants and toddlers, and frequently raised the issue of staff/child ratios on their own while responding to various other questions. Seattle respondents did not raise the issue independently, except in connection with questions about the FIDCR, and so appeared to be content with the staff/child ratios mandated by the state. Although most said that in actual practice they preferred to see a 1:7 ratio for preschool children--and two center directors said that they used volunteers or aides whose salaries were partially subsidized to keep a 1:7 ratio for their three- and four-year-old groups--our respondents felt that the state requirement of a 1:10 ratio for this age group gave them sufficient flexibility to group children and staff as they thought best and permitted centers to be in compliance with state regulations on those occasions when one or two staff members were absent.

Parent Participation

The FIDCR requirement for parent participation on the boards of centers serving 40 or more federally subsidized children elicited strong feelings on the part of our respondents. Their views on the need for parent participation were diverse. One day care center director argued that:

> *Parent involvement is really a crucial key. My focus is almost as much on educating the parents--helping them to see needs--as it is on educating the kids. As parents come together and do a lot of sharing and listening to other people, then I think their values change sometimes. There are a lot of things that have to do with parents that maybe a day care center can't do, but a parent should be able to come and ask you a question about almost anything, and you could somehow channel them in the right direction or give them some choices about what they can do.*
>
> *I've had parents that just really needed to talk and it might not be about their child; it might be about them--just really needing somebody to listen to them for a while that they feel would really understand. Also, we really pay attention to parents that really come back and forth and share. I get disturbed by the parent that just all of a sudden comes up with a negative thing. It's harder for me to deal with. It's harder for the teachers to deal with.*

Another center director was strongly opposed to the idea that parent involvement be required.

> People say that parents have a right to be involved in policymaking for day care, and it goes right up to the federal level. It's crazy! Absolute insanity for a lot of reasons. One is would you have parents running an airline or a mining company? Then why do you think that parents know about running a day care center--a business--any more than running an airline?
>
> Secondly, I've been on several boards and parents are not only not knowledgeable-- that's still ignored--but they have no investment in the program beyond a personal one at the time which easily gets lost. They don't stick around and their interests change. You can't run an organization--especially a business--with parents' volunteer support.
>
> Third, you can hardly get parents to read the bulletin board, let alone work in the center. All these people have been working and they're tired. They want their kids taken care of, and they don't want to be involved. To get them to come to graduation at our school took a two-month campaign of continually sending letters home. The year before we had 15 parents show up for graduation. This year we had a real good turnout--over 150 of them--but that's because the school prepared for graduation for months, put up signs, sent home things, begged the parents to come and told the kids to tell their parents they had to be there. It's real hard to get them to participate.

Most of our respondents agreed with one or more of the opinions given by the second day care director:

> *Parent involvement shouldn't be required because mostly they're so tired. University of Washington students really check out their day care programs, but other parents only want to find out what it costs and if there is a slot available. If I were directing a center, I would have major problems with parents telling me what I should do in terms of hiring staff and some basic kinds of things like that. I think it's very important for parents to give me major input on what kinds of staff they would like and on the kinds of things they would like to see happen to their kids. But I think I as the administrator need to make the final judgment.*

One respondent noted wryly that it was not just center directors who had difficulty with the idea of parents making policy:

> *People in state social service agencies have had a very difficult time accepting the comsumers' role in planning or even the providers' role. They're still fighting it. In Washington through their public regional meetings, they've at least opened it up for the public to come and speak, but public involvement has been one of the hardest implementation factors in all of Title XX.*

To some extent, a parent's decision to send a child to a family day care home or to a center and, in the latter case, the parent's choice of a particular type of center can be viewed as a form of parental participation in policymaking. How true this is depends on the options open to families. The type and number of facilities close by, whether transportation is provided, hours of operations and cost of care all affect a parents' choice. Also, once a child has become accustomed to a particular situation parents are often reluctant to change even if they are not completely satisfied with their child's care. Nonetheless, all of our respondents believed that parents' freedom of choice in selecting a day care facility was essential, and a major factor in their concern about enforcement of the FIDCR was that such freedom of choice might be curtailed for parents needing subsidized day care for their children.

The director who was so strongly opposed to requiring parental participation in making policy felt equally strongly that "*parents have an absolute right to evaluate the results of a program. In* *private* *day care, that's what they do in terms of leaving the kid in there. If they don't like the program, they'll pull the kid out and go elsewhere.*" That centers respond to the changes in parents' perceptions and expectations about the purpose of day care may be documented by the history of one particular center:

> *The name of South Town School when it first opened was Child Care Center. Parents were interested in was it safe to leave their children away from home? At that time one of the regulations was that there had to be a nurse on the premises or on call. Then, in about '65, the name was changed to Child Play Nursery because the trend had become is my kid gonna like it and have a good time? So sure, they'll play and have fun. So we were Child Play Nursery for another five years when we became Starter School because then parents were interested in is my child gonna learn anything?*

Our respondents felt that parents preferred family day care homes for children under three but wanted their nursery-school-age children in a day care center for education and socialization reasons. One respondent believed that parents who chose a family day care home for their three- to five-year-old children did so because they were concerned about the "*personal health of their child and they think it's better for their child not to be with a bunch of other children.*" Another commented that a lot of family day care homes offered programs for three- to five-year-olds almost identical to those found in centers in terms of educational activities and schedule.

Educational Component

That day care programs run by family day care homes and centers have an educational component is accepted matter-of-factly in Seattle. This acceptance is quite a contrast to the heated debate in Detroit between those who advocate a strong educational emphasis and those who prefer a "warm fuzzy" atmosphere. In Seattle the type of day care program described as ideal is one which combines both a warm fuzzy atmosphere and school-readiness skills. Education has a high priority in Washington: the illiteracy rate in the state is 0.6 percent which is half the the national average (1.2 percent); 96 percent of the five-year-old population is enrolled in kindergarten and 94 percent of the kindergarten population is enrolled in public kindergartens. The legislature is more comfortable about funding education than it is with funding social services: *"it's easier to get money for education than for welfare so that's the approach we take when trying to get funds for day care."* Several respondents pointed out that *"preschools are very common here. Many parents who in no way need day care have enrolled their children in nursery schools--a lot of them in cooperative nursery schools--so that their children get both education and socialization."* One director noted that *"in some of my suburban centers, a significant proportion of kids would be dropped off in the morning for preschool and picked up before 11. They were there for the experience."*

In addition to the fact that education is considered a basic part of a day care program, the fact that there is no apparent interest on the part of the Seattle public schools in providing day care may also explain the lack of a debate--so strongly heard in Detroit and to a lesser extent, in Atlanta--over the importance of an educational component.

> *The public schools aren't particularly greedy and they wouldn't be interested in getting into day care. Look, we know the schools don't see day care as their responsibility. They turn kids out on the streets at 2:30 when they know that parents are working and there's no one at home!*

The public schools do cooperate to some extent in the provision of day care in that the Seattle Department of Human Services has a contract with the Seattle public schools to provide social services (e.g., family counseling) for the families enrolled in a system of 21 centers and 10 family day care homes which have contracts with the Department. The public schools also have developed, as a guide for centers, a curriculum for four-year-olds that meshes with the curriculum taught in the public kindergartens and are working on a curriculum for two- and three-year olds.

A representative of the King County 4-C's told us that "*strictly custodial care is not too common in Seattle. Parents are looking for a program that offers their child something more than they could give him if they were staying at home.*" That "something more" was frequently described as a blend of "*a positive self-image, some readiness in reading, writing and arithmetic, and a warm caregiver.*" While other factors--such as field trips, particularly for children from low-income families--were also listed, the three factors listed above appeared in everybody's description of a quality program.

Two of the factors--a positive self-image and a warm caregiver--seemed to be closely linked in the minds of our respondents. While they would doubtless also agree that a child's self-image is enhanced by mastering different skills, our respondents thought that a child's self-image is best bolstered by something other than the ability to fit pieces of a puzzle together or knowing color names. They felt that a child's self-esteem is based on a belief that *"what comes from him is valuable"* and that this belief is transmitted by a caregiver who *"can look at an emotionally disturbed child and see what is healthy in him, who can see something positive in all children."* Such caregivers, they believe, must be able to understand that *"their ability to teach is not dependent on what the kid does. To be able to get rid of the conditional 'if he performs than I must be good.' They must be able to take what a kid paints--maybe just a smear--and appreciate that smear and not think there's something lacking just because he didn't turn out something beautiful."*

Staff Qualifications and Training

In Seattle, as in the other two sites, there was uncertainty about how a caregiver gets to be the sort of person who can enhance a child's self-image. Training has something to do with it, but training does not automatically ensure quality.

> *Years of experience or years of education -- I guess I'm to a point in my own head where I cannot say that this will do it or that will do it. All I know is that I've seen some terrible things happen to kids from very qualified people, and I have seen some magnificent things happen with kids from people who don't have any more than a high school education. Put them all together, and I don't know what you come up with. But I've seen it' we've all seen it.*

> *Early childhood education has been improving day care because training enhances nurturing. When you understand the process behind the nurturing process, then you can work better with children. I wouldn't go so much for formal education but would look for someone who likes kids. I want a caring, loving staff who know something about child development or are willing to learn.*

Our respondents agreed that there is no shortage of trained staff available in Seattle. There may be a shortage of funds to pay staff adequately or to act as an incentive for getting additional training, but they felt that the schools--particularly the community colleges--provided a good supply of caregivers who had been trained in early childhood development. One respondent from Central Community College said that there is a great deal of interest on the part of providers in receiving training--over 200 people attended six major workshops run by the College. However, she doubted claims by the state agencies that the community colleges are training all of the day care staff. "*If this were true, would we have to do so much in-service training,*" she asked.

Seattle Central Community College has a two-year program of day care training which grew out of the Parent Education Program; its emphasis is on the needs of a child and respect for children and parents. Five other community colleges--Belevue, North Seattle, Central, Shoreline and Highline--offer day care courses as does the Renton Vocational School. Central Community College is also the home of the Day Care Resource Center and the King County 4-C's office. Although Head Start does some of its own training, Central Community College has also done on-site training for these programs. The Puget Sound Association for the Education of Young Children has also been a very important training force outside the educational institutions.

Some day care directors question the practicality of in-service training; they maintain that staff turnover is so high that such training has little long-term impact on the quality of their programs. Other directors, however, feel that in-service training serves a valuable purpose if only because it is a way of providing staff who have not had formal coursework in child development with the background they may need to do their job better.

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State requirements regarding staff qualifications for day care center supervisory staff specify that the director be "at least 21 years of age and shall have the management and supervisory skills necessary for the proper administration of the day care center" and that the program supervisor "shall be at least 21 years of age . . . have a knowledge of child growth and development and techniques of guiding children's behavior . . . have at least two years successful experience working with children of the same age level as those served by the center and shall have either completed 45 college quarter credit hours or equivalent training in such courses as child growth and development and early childhood education . . . or shall have a plan approved by the department for the achievement of such training within a reasonable period of time, provided that the opportunity for such training is reasonably available." Such requirements cover the waterfront, coping very neatly with the issues concerning what combination of experience and education is most appropriate for caregivers.

In Atlanta, respondents seemed to favor day-to-day experience with children over years of education in selecting a staff, arguing that you can train for knowledge of child development but you can't train for warmth. In Detroit, respondents appeared to believe that it was an "either/or" situation, that the choice was between hiring a professional educator or a "warm fuzzy" mother. Although respondents there felt that the *"ideal person would be a warm, loving, trained mother,"* it was evident that they doubted that many such caregivers existed.

In Seattle, however, no one was willing to favor one factor over another in the matter of professional qualifications. Respondents maintained that what mattered was what type of person the caregiver actually was and not what made the person--whether education or experience--

turn out that way. Directors need a fair amount of flexibility in determining just which person is best for their particular center, and most of our respondents felt that the current regulations permitted the necessary flexibility:

> One of the problems I might have with regulations would be regulations saying that a person has to have a certain amount and kind of education in order to work with preschoolers. I have had on my staff a person with a master's degree in early childhood who just didn't work out for me. It was one of these things with 'This is the way I was taught,' and there was no flexibility. Another girl who is one of the head teachers also supervises the other head teachers. She has had three years of college but her major was in psychology or something; it wasn't in education. She's a super teacher and relates beautifully with the staff. I'd have some real difficulties if I couldn't have her in that position, if I had to choose somebody who had a B.A. in early childhood education over her just because they had the academic record on paper.
>
> Another head teacher I have has an M.A. and some work on a doctorate in science and she had worked mostly with high school kids. But she has adapted beautifully to the needs of the young child. She gets busy right away with any assignment that she is given; she gears things down and works with it.

Under the current regulations, this director is able to meet center staffing needs by augmenting the newly hired person's background with either training or the chance to work in a supervised position long enough to meet the requirement for experience with children of the appropriate age.

While the requirement that directors "have the management and supervisory skills necessary for the proper administration of the day care center" does not have a coursework requirement attached, several respondents felt that such coursework was sorely needed and not readily available.

> *A certificate program for directors would be great. There is the 45 credit plan, but that's only for those who work with kids. We have virtually nothing for administrators. You see there's no money available for that. You generally cannot use federal money for training administrators. You've got to use it for training people who provide direct services.*

What some directors and other respondents felt they needed was training in such things as counseling, personnel issues, and planning and management, in addition to coursework in child-related specialties. Such a program is not presently available in Washington, and some ingenuity is required for someone who wants to "do it myself":

> *One of my concerns when I went back for a master's degree was that I wanted to get some knowledge about how to administer a program for young children. There's no such place that you can get that anywhere. What I did was to get a M.A. in Early Childhood Ed. from the University of Washington, get a principal's credential because they had a certain number of administrative courses and a minor in business administration because they had some good courses. Then I had to relate all that to my knowledge of what the needs were for programs for children.*

Social Services

In addition to asking about the relative importance of an educational component and trained staff, the importance of social services as a component of a quality day care program was explored. Our respondents felt that day care centers should not be the primary providers of social services per se, although they felt that it was part of the director's job to refer parents to other resources in the community: *"day care in Seattle has a lot of other resources available to them but I'm sure many don't realize that."*

As mentioned earlier, the Seattle Bureau of Human Services has contracted with the Seattle Public Schools to provide social services to the clients served by the centers and family day care homes in the Bureau's system. The Bureau also has a contract with the King County Board of Health to provide "*preventive dental care, check medical files and, as a last resort, provide medical checkups, but we really try to encourage parents to take care of this themselves. If they don't, however, we will do it because we feel that parents can get along without social services but not without health services.*" Although social services were offered, a Bureau representative noted that counseling was offered, but "*there were hardly any takers. Parents want help in finding training in order to get out of dead-end jobs but they did not seem to want help with family matters.*"

One center director said that her center was affiliated with a denominational social service organization which was more than willing to supply the necessary counseling and other social services. However, because the workers were white and middle-class and most of the families in her center were nonwhite and lower-income, many times the parents turned to her as someone with whom they felt comfortable and who they felt would better understand the particular circumstances in their lives. For this reason, the director is hoping to return to school to get additional courses in counseling.

Although it was argued that few parents wanted family counseling or other social services, one respondent said that people shied away when it came to considering whether or not to offer social services because they felt that "*it would be like opening Pandora's box--that so many people would come rushing in that it would sink the services--which may just be the rationale* *not* *to provide what they didn't want to in the first place.*" A representative from the Department of Social and Health Services said that *"although there's a great need for some social services in day care, we provide virtually no social services to families. Our casework staff is so low in the local offices that we just don't have the personnel to do it."*

In Atlanta, respondents associated with private Title XX centers felt that a center's responsibility toward children and their families was not limited to just those hours when the children were in care. Thus those respondents felt that social and health services as well as other community services ought to be an integral part of their program. Respondents associated with non-Title XX proprietary centers felt that their responsibility was to take good care of children while their parents worked but that that responsibility did not extend to providing counseling or taking children for health care (except as a last resort), although they would encourage parents to provide the necessary services and make referrals if necessary. In Detroit, most respondents felt that the provision of social and health services would be a duplication of services already available elsewhere--services offered more cheaply than could be done by individual centers. In Seattle, our respondents seemed to feel that social services should be provided "as needed"--what services ought to be provided and by which organization really depended upon the needs of the population being served. In some cases state or city agencies provided the necessary services; in other cases the day care center took the necessary action--making referrals or providing the services directly. There was no apparent feeling on the part of the respondents that the way in which needs were met was the way in which things ought to be done; nor was there a sense that they had done what was necessary, but it was really not their responsibility. Once again, *"when a need gets great enough, somehow a person or a group gets found to do it."* It is doubtful that a policy outlining just which group should offer particular services would be well received in Seattle.

Racial and Economic Integration

Similarly, a policy mandating a certain racial mix would also be opposed in Seattle. Our respondents felt that there was already a good racial mix in most centers and that, to the extent that racial mix was skewed in some centers, such lopsidedness was due to housing patterns. While they might support policies which would change those housing patterns, they definitely would not support policies which required that race had to be a significant factor in determining which children were enrolled or which staff hired:

> *I think it's fantastic if you can have a racially mixed center. I think that's where it needs to begin and if you're working with parents also with a good kind of relationship, then I think that if there are going to be great changes, then this is where it's going to come from. I'm not sure that I would like to see any federal policies that say 'you have to do this;' I think that's an additional pressure that I don't feel we should have to live with. It's hard enough to run a day care center -- to deal with the people you have -- without having the additional pressure that says 'unless you have certain percentages of black, white, this, that and the other, you won't get any federal money.*
>
> *Kids need to have exposure to individual differences. I don't want a quota system but I would like an integrated staff. But don't lay it down in federal regs. where because you're black, I can't hire you. Suppose you have this fabulous person who comes in and you need one more person on your staff, but that person's white and you're required . . . I don't want a quota system.*
>
> *It's a matter of housing patterns plus the fact that lower income parents can't afford to transport kids. Obviously it's better to have a mix, but it's not a problem in Seattle. In North Seattle, it's mostly white, but more Orientals and Indians are moving in. It's good for the white kids. Head Start's been able to do some transportation, but it's not that bad a mix; it could be worse.*

In Seattle, economic segregation is not presently an issue. It is raised only in connection with the possible negative effects potential enforcement of the FIDCR may have. The plan to switch working AFDC parents to income disregard under Title IV-A may mean that those parents will send their children to unlicensed facilities and thus licensed centers will serve fewer low-income children. Our respondents were concerned that those children might receive poor quality care and that no one would be able to do anything about it. They were not worried that middle-income children would lose the benefit of interacting with lower-income children, and vice-versa. The actual impact of such a switch from Title XX to Title IV-A--whether it be on vendor payments, poor quality care, or economic segregation--was too far down the road as yet for it to be a rallying point for the various interest groups.

Summary

Seattle shares some similarities with Atlanta and Detroit. It is not accurate to call Seattle the mean between two extremes; rather in Seattle what we heard was a bit of Atlanta and a bit of Detroit mixed together and presented in a way that was uniquely Seattle's. Issues are less intensively argued here: battle lines are less clearly drawn and protagonists less easily identified. Seattle is "laid back", more relaxed and easy going. Seattle is a place which makes one question various social theorems: Turner may have been right and the frontier did end in the 1880's, but people in Seattle demonstrate that frontier virtues did not cease when westward expansion ended. Self-reliance, making do with what one has, resistance to people telling you what to do are values native to Seattle. Likewise, the idea of America the melting pot does not fit this city which holds its diversity dear; the more recent concept of America as a salad bowl in which each ingredient contributes its uniqueness to the whole is much more appropriate to Seattle.

Under Title XX, each state is free to develop a plan which best meets its particular needs. In all three sites, the way in which the initial Title XX plans were developed met with criticism. That criticism continues in Seattle. However, the end result of those plans appears to be a structure of allocating funds for day care which is the most that can be achieved so far. Hearings may or may not bring out all the points of view; reports may or may not be read; squeaky wheels may or may not get undue attention--in the end, the overall plan is one with which people can live. Such a plan is not limited to the plan for Tittle XX monies; state regulations, day care services, the way in which social and health services are delivered, and so on all seem to reflect "*just about where people are today.*" As one respondent said, "*No one sets out to give kids a bad day.*" Just so, no one sets out to do something that is contrary to the common good. In Seattle, people want to see that common good is not only hampered but is facilitated. They do it "their way" but what is most important is that it gets done.

The National Day Care Study from the Perspective of Black Social Scientists: Reflections on Key Research Issues

Ricardo A. Millett
Arthur Mathis

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PREFACE

The National Day Care Study (NDCS) was a large-scale policy study supported by the Administration for Children, Youth and Families (ACYF).[1] The study, completed in 1978, has made a timely contribution to the formulation of regulatory policy for federally supported center-based day care. Compared to previous social policy studies, the study has several important innovative elements. Among these is the participation of a Black Task Force, whose contribution to the research process has set a precedent for similar efforts in the future. This paper presents a brief account of the issues that most concerned the minority constituents of the NDCS and the manner in which these concerns were integrated in the study.

The history of social policy studies reflects both their political nature and their roots in conflicts of real or perceived interest among diverse social groups. The fact that our society is composed of diverse interest and ethnic groups who might experience different impacts of national policies on their own welfare places social policy research in a distinct category (Gil, 1973).

Unfortunately, the history of large-scale social policy research reflects a disregard for ethnic minority perspectives and expertise. This tendency has been particularly frustrating to minorities where social policies derived from such research have a disproportionate impact on the welfare of these groups, as is the case with federally subsidized day care. The overrepresentation of blacks in the NDCS sample was a compelling argument for incorporating the contribution of black professionals in the fields of child care and child development.

This paper was written by two black senior social scientists who, as staff members of the National Day Care Center Study, shared the concerns expressed by the minority consultants and were intimately involved in the Task Force's interaction with the remainder of the study staff. Although our position as brokers between study staff and the Task Force was awkward at times, our perspective on the issues was informed both by the day-to-day conduct of the study and the concerns of the minority consultants.

Two important purposes have been served by this paper. First, as a synopsis of the consultants' early concerns, it served as a working paper to which they could refer during their review of the NDCS final report. Second, it has aided NDCS staff in development of policy recommendations affecting blacks and other minorities. The paper and the summary of it that appears in the first volume of the Final Report of the National Day Care Study have been reviewed and approved by the members of the Black Task Force of the NDCS.

Ricardo Millett, Ph.D.
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CHAPTER ONE: FORMATION AND MAJOR CONCERNS OF THE BLACK TASK FORCE

This paper reviews the major concerns raised by black consultants to the National Day Care Study (NDCS) during the course of the study. Members of the Black Task Force, drawn from the NDCS consultant panel (see Appendix A), identified technical and policy issues of particular concern to minorities, especially the appropriateness of the NDCS outcome measures and the significance of their results for minority children. Because of the large number of blacks in the study sample, these consultants were concerned that the NDCS select instruments that were culturally fair--that is, measures as reliable and valid for black children as for white children. They also hoped to safeguard against the stereotyping of blacks and other minorities in the analysis and interpretation of data. Finally, they were concerned that the study's findings not lead to policies detrimental to black children or caregivers. These and other issues raised by the black consultants received considerable attention as the NDCS gathered and analyzed Phase III data, on the basis of which policy recommendations were made.

This chapter summarizes the National Day Care Study and describes the formation and major concerns of the Black Task Force. Chapter Two presents a review of the literature on research issues in the study of black children. In Chapter Three, the NDCS research instruments are examined in light of this literature, and specific research issues of concern to the consultants are explored. The final chapter summarizes the NDCS response to the concerns of the Black Task Force and presents the Task Force's conclusions and recommendations.

The National Day Care Study

The National Day Care Study was initiated in 1974 by the Office of Child Development (now the Administration for Children, Youth and Families, or ACYF) as a large-scale research effort designed to answer three major policy questions:

- How is the development of preschool children in federally subsidized day care centers affected by variations in staff/child ratio, staff qualifications, group size and/or other regulatable center characteristics?
- How is the per-child cost of center-based day care affected by variations in staff/child ratio, staff qualifications, group size and/or other regulatable center characteristics?
- How does the cost-effectiveness of federally subsidized, center-based day care change when adjustments are made in staff/child ratio, staff qualifications, group size and/or other regulatable center characteristics?

The study was conducted in three urban sites: Atlanta, Georgia; Seattle, Washington; and Detroit, Michigan. These sites were selected to reflect the sociocultural mix of children who are enrolled full-time in federally subsidized and day care centers nationally. The study sample comprised 64 day care centers--32 in Atlanta and 16 each in Detroit and Seattle. During the three phases of the study, which spanned a four-year period, approximately 3,000 children were observed and tested. Sixty-five percent of these children were black, 30 percent were white; the remaining children were of other ethnic or racial backgrounds.[2]

Two kinds of instruments were used to measure the effects of regulatable center characteristics--called policy variables--on the socioemotional, cognitive and physical development of children. Existing standardized tests (the Preschool Inventory and the Peabody Picture Vocabulary Test) and observation instruments developed for the NDCS (the Child-Focus Instrument and the Adult-Focus Instrument) were chosen as measures of the study's dependent variables--child development outcomes and day care center processes.

From the study's inception, ACYF recognized the need to subject the design, analyses and findings of the NDCS to rigorous scrutiny by a panel of technical and policy experts. This nationally selected group of experts, including psychologists, statisticians, economists and day care providers and consumers, has reviewed all major reports and made important suggestions that have improved the design and implementation of the study. Although not originally well represented, black consultants later became key members of this panel, and organized themselves as a task force to address issues of special interest to minorities.

Formation of the Black Task Force

The development of the Black Task Force is best understood as a response to a problem inherent in much social policy research. As Coleman (1972) has pointed out, in social policy studies the research problem is usually defined by a government agency. The task of the researcher in operationalizing the research problem is to remain sensitive to the interests of both the client and the diverse groups within our society who would experience different impacts of public policy decisions. This may require what Coleman calls "self-corrective devices, such as the commissioning of more than one research group, under the auspices of different interested parties, and independent review of research results using an adversary or dialectical process" (p. 16).

Such a process can contribute substantially to the viability of policy decisions when interest groups are represented in the dialogue that precedes those decisions.* However, the function of advisory panels and consultants in policy research is generally restricted to giving specialized post hoc input, their effectiveness often constrained by the prior formulation of research design and data analyses. Technical and advisory panels, then, become sounding boards used only after the research has been completed and recommendations for social policy have been made.

This problem was to some extent exemplified by the belated participation of minority consultants in the NDCS. Demographic data collected as early as fall 1975 revealed that nearly two-thirds of the study population, both children and caregivers, were black. Yet minority scholars and policy experts were involved only to a limited degree in the design of the study and in the selection of process and outcome variables and measurement strategies. As originally constituted, the consultant panel included only two members of minority groups among 15 proposed members. One was a black with considerable experience in day care services, and the other an economist of Asian background.

Several events were significantly related to the subsequent expansion of minority input to the NDCS. In March 1976, Dr. Asa Hilliard, a member of the SRI consultant panel who later joined the Abt Associates consultant panel, expressed concern about the appropriateness of the NDCS conceptual framework and instruments for black children and caregivers in his review of SRI's draft report on NDCS instruments (Appendix B). Hilliard questioned the integrity of the NDCS conceptual framework, noting that it did not demonstrate any significant examination of the black child development literature. He suggested that the NDCS' dependent variables were neither relevant to minority values nor universal for all day care centers, and questioned whether the instruments measuring the effects of day care were reliable or valid for black children.

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*Similar observations on the value of an "open scheme" of peer review prior to public dissemination of policy findings were made more recently by William Morrill, former HEW Assistant Secretary for Planning and Evaluation.[3]

Both Abt Associates and ACYF responded to this critique. Recognizing that a stronger minority voice among NDCS consultants was essential to the quality of the study's research, Abt Associates and ACYF moved to increase minority representation on the NDCS consultant panel.

In July 1976 (at the end of Phase II), at a joint meeting of the consultant panels for the NDCS and the National Day Care Home Study (NDCHS), the Task Force (then called the Black Advisory Board) constituted itself as a distinct body to address technical and policy concerns and other issues having special relevance for minorities. The concerns of the Task Force were articulated in a position statement made at that time, in which its members urged the NDCS to carry out its research efforts with extreme care in view of the history of previous national policy studies based on the analysis of "cognitive gains" in black children (see Appendix B). The statement included a set of recommendations and addressed detailed questions to the NDCS research staff. The recommendations called for more comprehensive review and advisory procedures for black and other minority consultants of both the NDCS and the NDCHS and set out research issues of particular concern. ACYF and Abt Associates accordingly took steps to establish appropriate review procedures and to address the specific research issues identified.

The Task Force made additional procedural recommendations for study review in a report of its December 1976 meeting (Appendix B). These recommendations were accepted by ACYF and implemented by ACYF and Abt Associates to ensure ongoing, substantive participation of the Task Force in reviewing all subsequent NDCS design, implementation and analytic tasks. The Task Force constituted a special subgroup of the consultant panel for review of all NDCS reports prior to publication.

Throughout this series of events, the continuing concern of the black consultants was that the NDCS proceed in the most sophisticated manner possible and not be hampered by technical or conceptual inadequacies that might impugn the study results or, worse, add to the body of policy research seen as injurious to blacks. The overall role of the Black Task Force was specified in its December 1976 report (Appendix B):

> . . . to act as a bridge between the current studies--National Day Care Study and National Day Care Home Study. The Task Force's job is to review, monitor, make recommendations and develop position statements on all activities of both studies and their spin-off studies to and with all contracting groups involved.

In that report, the Task Force emphasized that its priority issue was the policy implications of the National Day Care Study. "However," the report stated, "prior to any consideration of such policy issues our immediate concern involves basic research-related issues that will generate and ensure a qualitative and unimpeachable research design."

Major Concerns of the Black Task Force

The major concerns of the Task Force centered on the equity and appropriateness of the study's design, measurement procedures and analytic techniques for black children and caregivers. Task Force members were wary of the widespread "history of shallow research and negative consequences in social policy"4 that had affected blacks and other minority groups.

The Task Force addressed three general areas of concern in its review of NDCS activities:

- the adequacy and completeness of the NDCS conceptual framework;
- the reliability, validity and fairness of study instruments and their administration for the black children and caregivers studied; and
- the significance and relevance of the study's data analysis and policy implications for affected minorities, particularly blacks.

The first of these concerns is discussed below. The second and third issues listed receive detailed attention in subsequent chapters.

The first major criticism of the NDCS made by the Task Force was that an adequate review of the black child development literature had not informed the study's conceptual framework and design phase. Although the review presented in this paper was subsequently undertaken by senior social scientists at Abt Associates, earlier consideration would have enabled the NDCS to proceed from the beginning with greater awareness of black concerns. The Abt Associates review indicated that, given the state-of-the-art of psychometrics in child development and early childhood education, the NDCS cognitive measures represented, with qualifications, the best available. Task Force members continued, nevertheless, to express serious concern about the use of standardized tests as measures of cognitive development in black children. (This issue is discussed in Chapter Three.)

The second major criticism by the Task Force of the NDCS conceptual framework concerned the study's approach to defining "quality day care." The NDCS framework did not rely upon a specific developmental theory of quality day care. Instead, quality was conceptualized as a continuum ranging from harm to optimal effects for children. A variety of measures of child and caregiver behavior and child outcomes were selected to construct alternative definitions of quality care.

The Task Force warned that major emphasis on the results of two child tests--the Preschool Inventory (PSI) and the Peabody Picture Vocabularly Test (PPVT)--would inappropriately suggest both that preschool education and school readiness were the primary goals of day care, and that the PSI and PPVT, by themselves, were adequate measures of preschool education and school readiness. The Task Force argued that not all day care programs are designed as interventions (like Head Start) having the express purpose of improving the cognitive achievement of a homogeneous population of children. Thus, it would be inappropriate to rely on partial measures of center characteristics in evaluating day care centers against educational goals that centers might not hold as paramount. The Task Force emphasized that interpretation of effects findings should address these issues.

Fortunately, the NDCS design was not constrained by a narrow emphasis on cognitive achievement. The PSI and PPVT were elements of a set of measures selected to assess children's socioemotional, cognitive and physical development. In Phase III data analyses, PSI and PPVT adjusted gain scores were evaluated in conjunction with observational data on child and caregiver behaviors. Effects findings reported in the first volume of the Final Report of the National Day Care Study present patterns of beneficial effects and do not rely on test scores in isolation.

In fact, given the scarcity of adequate measures of cognitive development, inclusion of the PSI and PPVT in the overall definition of quality care was a legitimate attempt to respond to the opinions expressed by parents and center directors during Phase II and Phase III interviews. Preparation for school was important to most parents; encouraging an interest in learning and developing their child's emerging language skills were among aspects of school preparation specifically identified by parents. Center directors' response to questions on day care program orientation generally rated school preparation as an important aspect of their programs. However, the interviews also reinforced a major point made by the Task Force: day care programs encompass a wide variety of goals for children that respond to the naturally diverse interests of parents and caregivers.

CHAPTER TWO: ISSUES RELATED TO RESEARCH ON BLACK CHILDREN

In the child development literature the study of blacks is extensive, yet the results to date have been dubious and inconclusive. The same can be said of much early childhood research, but for black children such ambiguous results pose special problems when national policy is based upon questionable research findings.

This chapter begins by examining some persistent assumptions underlying the study of black children, the use of standardized tests and the interpretation of test ratings for black children. The psychometric integrity of standardized tests and situational influences on test performance are also discussed. Finally, the use of naturalistic observations in research on black children is reviewed.

The Study of Black Children and Families

The view of American culture as a melting pot of different racial and ethnic groups forming a more or less homogeneous culture has led to the application of white middle-class standards in the testing of all children. The failure of black children to "succeed" on such measures has often been interpreted as an indication of inadequacy, due to either inherent deficiencies or to cultural deprivation.

Early studies of cultural disadvantages were attempts to amass evidence that would cast serious doubt on, if not invalidate, the genetic model of racial differences (Dokecki et al., 1975; Clark and Plotkin, 1972). Thus, Gordon's (1923) study of English canal boat children and gypsy children and the Wheeler (1932), Sherman and Key (1932), and Asher (1935) studies of American subjects living in small, isolated, economically and culturally impoverished communities showed that low performance on standard tests of intelligence could better be explained by poverty and lack of stimulation in the environment than by genetic differences between racial or economic groups. Similar evidence has been presented which shows differences between urban and rural white children (Shimberg, 1929; Klineberg, 1931), southern and northern black children (Klineberg, 1935a, 1935b; Lee, 1951), and children placed in improved socioeconomic environments (Skodak and Skeels, 1949).

These studies have been interpreted to mean that an improved (enriched) environment leads to improved test scores. Investigators examining the relationship between test performance and socioeconomic background found that as socioeconomic status improves, so do IQ scores (Deutsch and Brown, 1967; Kennedy, Van de Riet and White, 1963). The cultural deprivation theorists concluded on the basis of such evidence that the environment significantly contributes to the development of cognitive skills, that some environments are more stimulating to cognitive development than others and that research should identify deficiencies in the environment of the culturally disadvantaged in an effort to modify their effects through the educational process.

Thus it has often been assumed that lower-income children, especially blacks, fail to do well on tests of intelligence, achievement, aptitude and ability because of inadequate early socialization experiences in the home (see reviews by Katz, 1969; Samuda, 1975). It is sometimes assumed further that early childhood experiences in poverty environments create enduring cognitive and personality deficiencies that are inimical to competence not only in the school setting but, indeed, at virtually all stages of life.

A number of studies on the status of black families and their living arrangements have concluded that blacks need to be "saved" from their own pathology (Moynihan, 1965; Rainwater, 1965; Rodman et al., 1968). One might conclude from these studies that typical black families are female-headed, on public assistance, have a number of illegitimate children, are thriftless, and, not surprisingly, do not adequately provide their children with the skills, attitudes and motivation necessary for academic success. For example, Ausubel and Ausubel (1963) see lower-income black families as high in authoritarian attitudes and low in close parental supervision. Bettelheim (1964) asserts that the early experience of the black child is conditioned by distrust of others and low self-confidence. McClelland (1961) postulates that blacks are lacking in achievement motivation because of the matricentric structure of the family. The latter view has been extended by Pettigrew (1964), Bronfenbrenner (1967) and Moynihan (1965).

Researchers have often postulated that the high incidence of absent fathers in black families is a major contributing factor to academic failure among black children. Kamii (1965) and Hess, Shipman and Jackson (1965) found evidence of socioeconomic differences in parenting behavior, indicating that lower-income children's early efforts at verbal and cognitive mastery are less likely to be reinforced than the efforts of children in middle-income homes. Similarly, Hunt (1968) expresses the view that black parents are poor models for linguistic development of children. Deutsch (1967) found that the noise level of lower socio-economic environments has a debilitating effect on the child's auditory discrimination, attention span, memory span and responsiveness. Hess et al. (1965) and Bernstein (1961) concur that there is a dichotomy between lower-income and middle-income language that is related to school success. These studies taken as a whole are considered evidence of the early deprivation of lower-income black children.

With the recent rise in "ethnic consciousness" among the nation's minorities, however, social scientists have begun to recognize that ethnic groups see their ethnic identity as equal in importance to their national identity, and that there are cultural differences between blacks and whites that have implications for research on multi-ethnic populations. It has also been argued that economic, social and psychological forces from the larger community, confounded by racism, do much more in shaping the character, opportunities and social propensities of black children than does alleged weakness in the black family (Slaughter, 1977).

Billingsley (1968) points out that two-thirds of black families living in metropolitan areas are headed by husbands with their wives present, half have managed to pull themselves out of poverty and into a middle-income bracket and nine-tenths are self supporting. Scanzoni (1971) conducted an extensive study involving more than 400 intact black families in which the parents had been married for at least five years. He found these families to have strong father figures who tended to share equally in domestic decisionmaking. Hill (1972) demonstrated that the majority of black families can be characterized by strong kinship bonds, belief in the work ethic, achievement and role adaptability. Yet despite these arguments, the literature continues to reflect a picture of black children caught in an inescapable cycle of poverty and race and family pathology.

The recognition that cultural differences exist among ethnic groups has not always led to an understanding of the nature of these differences. It is often assumed, for example, that social or ethnic groups can be neatly classified according to some set of socioeconomic indicators. Some students of the black family and black child development argue that socioeconomic indicators are less reliable as status measures when used in the nonwhite community. Billingsley (1968) believes that such indicators have resulted in an overestimation of the number of lower-income blacks, and that this obscures rather than clarifies much of the variety of status and behavior within that group. Although it may appear logical to assume that different ethnic groups within the same society can be compared using the same socioeconomic criteria, this may not be the case in a multiracial, multi-cultural society such as the United States. We must come to grips with the variability among individuals classified in the same economic group:

> A category of people homogeneous on the economic index of poverty consists on other indices of an extremely heterogeneous lot having one characteristic in common--lack of financial resource--[and this] does not necessarily imply the common possession of other characteristics (psychological traits) (Allen, 1970, pp. 367-368).

A similar argument can be made regarding the classification of individuals into racial groups; however, neither social scientists nor policymakers have come to terms with the meaning of racial classification. Moreover, one cannot readily dismiss the further ambiguities introduced by miscegenation since the colonization of North America, and by the possibility that individuals may differ not because of their race, but rather because of the way they have been treated because of their race.[5]

Psychometric Integrity of Tests

According to Taylor (1971), Angoff and Ford (1973), Meyer (1974) and Klineberg (1935b), black children are very often at a serious disadvantage in standardized testing because they have not been exposed to information required in order to be successful on the test. Language considered to be "common in most performance measures is not necessarily common to children living under impoverished conditions" (Baratz, 1969; Baratz and Baratz, 1970; Anastasi, 1976; Stewart, 1969). Consistently low performance by certain minorities indicates that there may be a biasing set of factors in the tests or in the conditions of test administration (Green, 1971; Bernal, 1975; NAACP, 1976), which have been shown to be critically related to test reliability. Barnes (1972), Williams (1972a) and Jorgensen (1973) concur that the consistent failure of minorities on tests demonstrates that such instruments are biased. In part, bias results from the selection of test items and from the standardization procedure, which has often excluded minorities (Anastasi, 1976; Mercer, 1972). Earlier, Canady (1943) argued that tests standardized on samples of white subjects could not be considered as adequate measures for comparing whites and nonwhites.

Indeed, it is questionable whether any test can be developed that is truly culturally fair. Loehlin et al. (1975) believe that culture is so pervasive that no psychological test of sense perception, motor performance or intellectual ability would be culture-free (or, when applied transculturally, culture-fair) except for tests of behavior traits controlled by known genetic factors. The studies mentioned above serve to emphasize the difficulties involved in cross-cultural comparisons, even when the differences are small. Even though the cultural differences between an American inner-city child and an American suburban child are small in comparison to the differences between either of these and a child in China, it is clear that the cultural difference between inner city and suburb is not zero. Unfortunately, this has been difficult to demonstrate since many of the intelligence, ability and performance tests frequently interpreted to show that minority and rural children are inferior to white urban children have been standardized solely on the latter group (e.g., the Stanford-Binet

Intelligence Test, the 1949 version of the Wechsler Intelligence Scale for Children, the Peabody Picture Vocabulary Test).*

The extent to which tests can be unfairly standardized has been aptly demonstrated by Shimberg (1929), Dubois (1939) and Williams (1972b). In a classic study, Shimberg (1929) standardized two information tests. One was standardized on a rural population, using such items as "Of what is butter made?" and "How can you locate the Pole Star?" The other information test was standardized on an urban population and included such items as "What are the colors in the American Flag?" and "What is a referendum in government?" When the two tests were administered to children in rural and urban schools, results showed rural children to be superior to urban children on the rural version of the test, and urban children superior to rural children on the urban version of the test. In another study of standardization bias, Dubois (1939), following the same general procedures that Goodenough (1926) used to standardize her Draw-a-Man Test on white children, standardized a Draw-a-Horse Test on Indian children in New Mexico. He then administered the test to white children in New Mexico and found that on the average they scored 26 IQ points below the average for the Indian children. Similarly, Williams' (1972b) Black Intelligence Test of Cultural Homogeneity (BITCH), which is intentionally biased to favor blacks, has been employed to demonstrate that differences in test performance can be produced by the instrument itself. The BITCH is a vocabulary test based on words and phrases distinctive to the black culture. On the average, blacks score higher on the test than whites do. Although such studies do not provide a basis for determining what proportion of between-group differences stem from test bias, they do demonstrate that bias in standardization procedures can contribute to measured group differences.

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*Of these only a revised version of the Peabody Picture Vocabulary Test is included in the NDCS test battery.

Another serious problem related to the psychometric properties of tests with respect to minorities involves the predictive validity of a test. Williams (1970) has reported a study where minority postal employees were hired without the usual screening tests. At the end of one year, the employees were rated on their job performance and then given the screening tests. Williams reports that the majority received satisfactory performance ratings, although they all failed the screening tests. The problem of bias in tests is not easily resolvable, as Flaugher (1974), Schmidt and Hunter (1974) and Loehlin, Linzey and Spuhler (1975) have discussed. A test can be fair at the individual level and unfair at the group level, and vice versa.

Further, the validity and reliability of tests have been shown to be affected by race of examiner (see Jorgensen, 1973; Garcia and Zimmerman, 1972), cross-language interference (Hickey, 1972; Williams, 1972a) and test format (Johnson and Mihal, 1973). It appears that aside from the instrument itself, a number of other aspects of the individual's perception and attitude toward the situation are as critical to his performance as his prior experience (Katz, 1969; see also Epps, 1974; Flaugher, 1978). These factors are examined in the next section.

Situational Influences on Test Performance

We often assume, as do test manuals, that data from tests are collected under standard conditions and that these conditions do not contribute unknown error in test performance. Tests that are individually administered to children require the test administrator to establish rapport with the child and to remain alert and ask for additional information in the case of incomplete or unclear answers. Data collection, however, is a human enterprise. In spite of training, drills, role playing and rehearsals, it is difficult to determine if tests are administered under optimal conditions. Many insist, nevertheless, that such artifacts are only random, as is the optimal test-taking mood of the person being tested. They argue that in most instances the test situation has negligible effects on test performance.

A point often overlooked is that the typical testing condition may be perceived differently by children from different racial, ethnic or social backgrounds (Gay and Abrahams, 1973). It is also plausible that the test situation could be perceived as threatening (Sarason, 1972; Zigler, Abelson and Seitz, 1973), and that the anxiety level of the child could be related to characteristics of the test administrator (e.g., race, sex, age, language) and other observable influences (Katz, Roberts and Robinson, 1965; Sattler, 1970; Garcia and Zimmerman, 1972; Savage and Bowers, 1972).

There are many reasons why children's test performances may be depressed or elevated in a given test setting, but these circumstances are difficult to sort out and evaluate. In a complex experiment designed to disentangle the impacts of the testing situation from other variables, Zigler, et al. (1973) found that disadvantaged children who were familiarized with the examiner in a play period prior to the administration of the Peabody Picture Vocabulary Test (PPVT) had higher scores than did nondisadvantaged children. They contend that "these findings support the view that disadvantaged children approach testing situations with a general situation wariness which results in their obtaining IQ scores beneath the level dictated by their cognitive competence" (1973, p. 301).

Kinnie and Sterrlor (1971) also reported a similar increase for Wechsler Preschool and Primary Scale of Intelligence (WPPSI) IQ scores for middle-class white, lower-class white and lower-class black preschool children who were familiarized with adults similar to those administering the tests. Familiarizing children with the language and materials used in the test and giving them an opportunity to practice in a test-like situation also raised scores. Familiarization had greater effect on the performance subtests than on the verbal subtests. Scores were also affected to a greater extent by familiarization with the middle-class examiners and the test language and materials than by practice in a test-like situation.

In a study by Thomas, et al. (1971), two female examiners of Puerto Rican origin administered the Wechsler Intelligence Scale for Children (WISC) to 116 Puerto Rican working-class children to investigate examiner effect on IQ testing. Both testers spoke fluent Spanish and English. Children were tested in the examiners' homes, which were located in middle-class high-rise apartment buildings. The examiners differed in degree of familiarity with the children and interaction styles. Examiner A was familiar with the children; Examiner B was a total stranger. Examiner A tended to describe children's test-taking behavior in more favorable terms; she spent time familiarizing the child with the apartment before beginning the test, encouraged the child to ask questions, and encouraged the child to try again if he/she said "I don't know." In contrast, Examiner B described herself as quiet and reserved. She approached the children seriously; she did not try to generate conversation; she tended to remain silent if the child hesitated or said "I don't know."

Verbal and performance IQ's reported by Examiner A were ten points or more higher than those reported by

Examiner B. Sixty-five percent of the children tested by Examiner A achieved average range, whereas only 15 percent of the children tested by Examiner B were rated at average or better. In contrast, 45 percent of the children examined by Examiner B scored in the borderline defective range compared to 5 percent of the children tested by Examiner A. When 19 of the children were retested 7 to 16 months later by the other examiner, in every instance the scores obtained by children tested by A were higher than those obtained when the same children were examined by B. The superiority of the scores obtained by A was independent of whether A did the testing or retesting. A somewhat perplexing finding, however, is that rank order correlations between academic achievement scores and IQ scores favored Examiner B.

Flynn and Anderson's (1976) study of different affective styles on the performance of "disadvantaged" and "nondisadvantaged" seventh graders demonstrated that the wording and content of the test's introductory statement can affect test performance of disadvantaged children without the active involvement of the examiner. Research on the effects of different types of preliminary instructions on performance suggest that certain types of stress can be aroused by test instructions. Katz, et al. (1965) varied instructions (describing the task as an intelligence test versus a research instrument to determine eye-hand coordination) and race of examiner (black male vs. white male) in an experiment with southern black male students. Students performed better with a white examiner when they were given the eye-hand coordination instructions than when given the intelligence test instructions. Katz and his colleagues interpreted the results as showing that a combination of tester's race and instructions arouse anxiety or fear of failure. In a review of research on test anxiety, Kirkland (1971) notes conflicting findings but points out that, in general, extreme degrees of anxiety are likely to interfere with performance, whereas mild degrees of anxiety seem to facilitate performance.

There may be other factors at work within the testing situation that mediate the effect of the examiner's race on the child's performance. There is some evidence suggesting that the language and background of the examiner interact with the language and background of the children being tested and thus influence performance. A recent study by Williams and Rivers (1975) demonstrated that students' test scores do show improvement when black children's language is employed in the test. Williams (1972a), who earlier argued that most achievement tests favor white children because they are written in standard English, points out that black children must translate items logically and quickly from a not-too-familiar language before they can respond to the question (Williams, Mosby and Hirson, 1976). A related study by Simpkins (1977) demonstrated that black children show an increase in their reading level when materials are presented in black dialect. However, one study which investigated the effect of black dialect on IQ test performance of black third- and sixth-grade children reported no significant difference between scores of children administered the test in black dialect and standard English (Quay, 1974). Marwit and Newmann (1974) report a study in which black and white examiners administered standard and nonstandard English versions of a reading comprehension test (California Reading Test) to black and white second-graders. Black children did not differ in their ability to comprehend the two versions of the test.

Some observers feel that standardized testing of young children is so problematic that alternative methods of assessment such as observations of behavior in semi-structured situations or natural settings must be developed (Walker, 1973; Bronfenbrenner, 1974). Whatever the argument regarding problems of situational variables in testing young children, it should be clear from the above studies that any child's performance in a test situation can be critically affected by factors not usually considered in administering standardized tests or interpreting the scores. Of special concern to the Task Force were factors that might negatively affect the performance of black children.

Naturalistic Observations

Bronfenbrenner (1974), in describing American developmental psychology as "the science of the behavior of children in strange situations with strange adults," calls for more ecologically valid research on children in their natural context.* After an extensive review of preschool measures, Walker concluded that, because of their nonverbal attributes and "objectivity," observational techniques are the "most effective socioemotional measurement strategy for use with young children" (Walker, 1973, p. 40). She suggests that future research and development of observational techniques will have more favorable payoffs than investments in other measurement techniques of young children. However, other investigators suggest that great care should be taken in the use of observational methods for evaluation of children's behaviors because most such methods are still very rudimentary.

One of the most obvious problems in observational measurement is its reliability (Herbert 1970). There are two types of reliability to be considered. The first relates to the objectivity of data revealed by the amount of interobserver agreement in recordings of the same behavior.

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*In view of the state of the art of preschool measures, the NDCS decided to include observations to identify major child outcome variables in the preschool setting. The study is one of the largest single observation studies of preschool children ever undertaken.

Susman, Peters and Stewart (1976) examined 126 published observation studies conducted between 1960 and 1974 and found that, of the 68 percent of the studies that reported reliabilities, the most popular form was percent of agreement between observers.[6] Accuracy against a standard and stability coefficients were infrequently reported. In light of recent empirical findings that agreement among observers is subject to decay over the observation period (e.g., Mash and McElwer, 1974; Taplin and Reid, 1973), one might expect that during the 1970's there would be a decrease in the reliance upon single pre-study estimates of agreement. In fact, however, studies have not developed more stringent or more sophisticated assessments of reliability or accuracy.

The authors of this paper were unable to find any study that had examined interobserver agreement between different racial, sex or age groups of observers. It seems probable, especially in view of the test-situational influences discussed in the preceding section, that such interobserver agreement could pose serious reliability problems. However, studies would have to be large enough to uncover such effects. Furthermore, the typical procedure for determining interobserver agreement involves mostly pre-observational conditions, with agreements judged against a standard set of behaviors. As pointed out in studies cited above, such agreement must be determined over the course of the observations as well. For example, although in training sessions black and white observers may demonstrate acceptable levels of agreement, their observations of children in the test environment must continue to show the same level of agreement.

Berman and Kenny (1976) concluded from their experiment on correlational bias (i.e., the systematic distortions in ratings which are artifacts of rater or observer errors) that implicit assumptions about traits and behaviors may seriously bias the correlations derived from observer ratings (see also Block, 1977; Berman and Kenny, 1977). The Berman and Kenny (1976) study is somewhat ambiguous but nevertheless suggests that implicit assumptions by observers regarding interrelationships among personality qualities strongly and systematically affect trait ratings by these observers. As will be discussed in Chapter Three, the NDCS is the only large-scale study to report similar effects.[7]

The second type of reliability has to do with the variability of the trait being measured. As we all know, human behavior is variable from one time to another and from one situation to another, and one of the advantages of observing children in a natural setting is that this variability can be captured. Brandt (1972) points out that the only way to determine just how variable particular behavioral traits are is to collect a considerable amount of observational data on the same traits and calculate the degree of similarity over varying settings and time periods. The stability of a trait over time and setting is very important when the trait is considered a characteristic of the individual. For example, a child who acts shy and withdrawn across all times and settings is a different type of child from one whose shy and withdrawn behaviors vary across different times and/or settings. The latter behavior is more likely to be related to the environment in which it occurs. Interpreting the stability coefficient of a trait is not simple and can be even more complicated when different observers are making observations.

Another point of concern regarding observation measures is their validity. Webb et al. (1966) caution that most research procedures risk being adversely affected by subjects' awareness that they are being studied. This problem is a particularly sensitive one in observational studies, even though most investigators downplay its effect by recounting anecdotes of families so unaware of the observer's presence that they act in an "extremely normal fashion," including spanking, bickering and other displays of normal behavior. As Webb and his colleagues observe, however,

> . . . the determination of reactive effect depends on validating studies--few examples of which are currently available. Behavior observed under non-reactive conditions must be compared with corresponding behavior in which various potentially reactive conditions are introduced. Where no differences in the direction of the relationship occurs, the reactivity can be discounted (pp. 15-16).

It is difficult to introduce simple experiments in natural settings, and Webb et al. suggest introducing multiple measures concurrently. However, it is difficult to identify other measures which overlap greatly with observation categories. For example, Sears (1963) was interested in studying the relationship between observable behaviors related to self-esteem and achievement and criterion measures of the variables. She reported finding moderately stable dimensions of classroom behaviors, but these had little relationship to her criterion measures.

Another problem in identifying multiple measures is that they often measure different aspects of a behavior. It is highly questionable whether observational systems designed to measure a specific category of behaviors--for example, aggression--adequately allow for inclusion of the degrees and types of such behavior that exist. This is an important concern when categories are applied across groups that differ markedly in life styles, values, beliefs and life experiences. The argument noted above against the using tests for populations excluded from the standardization process is equally applicable here.

CHAPTER THREE: REVIEW OF NDCS OUTCOME MEASURES AND RESULTS

This chapter examines many of the research issues presented in Chapter Two in light of the NDCS outcome measures. The most serious criticisms made by the Task Force focused on the appropriateness of NDCS outcome measures--standardized cognitive tests and observation instruments--for black children and caregivers and the pitfalls of racial bias in testing and observation. As explained in Chapter Two, research by a growing number of scientists indicates that:

- The current state-of-the-art of psychometrics has not successfully met the challenge of constructing valid and/or culture-free measures. Conventional tests are not accurate in describing the experience, or assessing the competencies, of blacks and other ethnic minorities.

- There are cultural differences (or at least behavioral, communication and interactional style differences) between blacks and whites that are not taken into account in the construction or interpretation of standard cognitive and socioemotional tests.

- There is evidence that standardized tests and observation instruments are subject to race-of-tester/observer effects that pose reliability problems when these measures are used for black children.

Questions of the appropriateness of NDCS outcome measures for black children and caregivers and the extent of measurement effects in NDCS data are explained in detail below. These questions are particularly important because blacks consitituted a large majority of the NDCS child and caregiver populations.

Issues of instrument fairness and interpretation of effects data have other implications as well. The impact of NDCS results on federal policy relating to regulation of day care centers will affect both the quality of day care that many black children receive and the employability of minorities in the day care market. The policy implications of NDCS findings affecting minority populations will be discussed in Chapter Four.

NDCS Cognitive Measures

In Phase II of the NDCS, a comprehensive battery of child outcome measures was field-tested: the Preschool Inventory (PSI), the Matching Familiar Figures Test, the Motor Inhibition Test, the Pupil Observation Checklist and the McCarthy Scale of Verbal Memory. Of these, only the PSI was determined to be psychometrically acceptable for use in Phase III. Although not part of the original battery, the Peabody Picture Vocabularly Test (PPVT) was added in Phase III as a measure of language development because this skill could not be assessed independently by the PSI. Psychometric reliability notwithstanding, the Task Force elucidated major concerns associated with the PSI and the PPVT. As a result, Abt Associates, with support from ACYF and encouragement from the Task Force, undertook an extensive review of these measures, which is presented below.

The Preschool Inventory

The Preschool Inventory (PSI) was developed by Bettye Caldwell for Project Head Start in 1965 as a measure of children's achievement in areas necessary for success in school. It was intended to provide an index of achievement associated specifically with educational intervention through Head Start programs. Thus, one aim in designing the PSI as a predictor of school readiness for "disadvantaged children" was to provide educators with an instrument to gauge the degree of remediation a disadvantaged child needed prior to entering school, so that deficits might be reduced or eliminated (Cooperative Tests and Services, 1970, p. 4).

Because the PSI was intended as a predictor of success in the white middle-class school system, no attempt was made to develop a "culture-fair" test, and the PSI is by no means free of cultural bias. The assumptions underlying the PSI derived from the "cultural deficit" model, which was the dominant approach to lower-income children, especially black children, in the early child development research of the mid-1960's. Current Head Start policy and programs, however, place more emphasis on the special strengths of minority and/or economically disadvantaged children (Collins, 1976), and recent research dictates a broader perspective on school-readiness behaviors (Lazar et al., 1977). Given the recent federally supported effort to develop a test battery to measure the social competency of Head Start children, it appears that current approaches have moved away from major emphasis on the PSI.

The original version of the PSI consisted of 161 items, but the instrument has undergone several revisions, each reducing the number of items. A 64-item version was standardized for the Head Start population on the responses of 1,531 children tested in 1969 in more than 150 Head Start classes in different parts of the country. The standardized sample consisted of black (64.2%), white (16.5%), Mexican-American (5.9%), Polynesian (5.1%) and Puerto Rican, Native American or Eskimo (4.2%) children between the ages of three years and six years five months. (This sample included only children tested in English.) The national norms developed from the standardization sample are inadequate and have questionable meaning, because two of the five age groups used comprised fewer than 200 cases (three years to three years eleven months, and five years six months to six years five months). The PSI Handbook fails to caution users regarding the small number of cases involved in these age groups, yet it does caution users about regional norms based on fewer than 200 cases. The data presented in the PSI Handbook on regional norms, along with variation in performance on the PSI across regions, suggest that the standardization sample may not be representative of Head Start children across the United States.

A 32-item version of the PSI was developed by Stanford Research Institute and first used in the Head Start Planned Variation Study in 1971. The decision to use the 32-item version of the PSI in the NDCS was based primarily on a review of this version by Walker and her colleagues (Walker, Bane and Bryk, 1973). This study, however, reported a number of concerns regarding use of the PSI, including cultural bias, scoring ambiguities, possible practice effects and questionable predictive validity.

The inherent cultural bias of the PSI has been noted above. An Educational Testing Service study (Shipman, 1972) found large performance differences among socioeconomic groups, supporting the position that the test is not culturally fair, at least across socioeconomic strata. The biases of the test are defensible on the grounds that "there are a number of skills which every child, whatever his background, will have to possess to be successful in kindergarten" (Walker et al., 1973, p. 371), and also because the test does not purport to be a culture-free assessment of cognitive ability. Walker and other critics have suggested that certain items do not reflect school achievement biases, but rather regional and ethnic or racial biases unrelated to school success. For example, the only correct answer to the question "Where does one find a lion?" is "in a zoo." Children who answer "in a jungle" or "in Africa" are marked wrong. Another item asks, "Whom does one go to when sick?" Again the answer is restricted; it is wrong, on the PSI, for the child to respond that he would go "to the hospital" or "to his parent or teacher," rather than to a doctor or a nurse. Another question, which presumably measures what the test refers to as associative vocabulary, asks "Which way does the ferris wheel turn?" The relationship of such items to school readiness is not obvious.

Walker and her colleagues also note scoring ambiguities in the PSI as an area of concern. Some items allow credit for having part of an answer correct and others do not. For example, in response to the direction "Color the triangle orange," the child is given one point for selecting the correct geometric shape and another point for selecting the correct color. In successfully responding to the request "Put the yellow car in the little box," however, the child is given only a single point despite the fact that judgments of color, size and relationship are required. Walker et al. also point out that the PSI may have stronger practice effects than other tests and recommend further study of such effects.

A perplexing question in judging the merits of the PSI is raised by children's performance on the first item of the test, which simply asks, "What is your name?" Interestingly, across all age groups, approximately 10 percent of NDCS children failed this item. One possible explanation could be that the sample consists of a large number of children who are retarded in their development; however, comparisons with items of similar difficulty do not indicate this to be the case. Another possibility is that certain children erroneously, as scored on the PSI, respond with their nicknames. In view of the frequency of this "error" and the possibility of negative situational effects in testing, inadequate responses to this first item might reflect the anxiety of some children in the test situation. It is possible, therefore, that test scores could be depressed for such children.

The predictive validity of the PSI is also an issue. Bache (1975) notes that the PSI, as would be expected, correlates more highly with tests of verbal ability than with tests of other developmental abilities in young children. Others have noted a lack of predictive validity with school achievement, other achievement tests or even reading tests (French and Calson, 1969). Shipman, McKee and Bridgeman (1976) attempted to examine the PSI as a predictor of later school achievement. They reported moderate correlations between children's PSI scores in Year 1 (prior to preschool) and their achievement scores on the Raven Colored Progressive Matrices (.52), Cooperative Primary Tests--Reading (.59) and Cooperative Primary Tests--Math (.59) in Year 6 (third grade). Shipman and her colleagues were only interested in the PSI as a covariable for predicting the influence of Year 1 family status, situation and process characteristics on school achievement. These variables were also substantially correlated with the achievement scores. However, when the effects of the Year 1 PSI scores were statistically removed through semi-partial correlations, the magnitude of most of the zero-order correlations between family characteristics and achievement that had been significant was substantially reduced. In general, the semi-partial correlations were small and statistically insignificant (Shipman et al., 1976, pp. 145-146).

What Shipman and her associates found was that aside from mother's education, expectation and aspiration, family status and process variables in Year 1 provided less explanation for later achievement (in Year 6) than when PSI performance in Year 1 was taken into consideration. A series of stepwise regression analysis supported this conclusion. After entering family process and status variables, Shipman and her associates found that the PSI predicted an additional 6.4 to 7.0 percent of the variance in the third grade (Year 6) reading, math and Raven scores, which suggests the interaction of family characteristics and early readiness (as measured by the PSI) for later school achievement.

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In an effort to control the influence of family characteristics on PSI performance at T_1, the NDCS decided to employ change score analysis, which we note here. Although there have been several criticisms directed at the use of change scores in the literature (see Cronbach and Furby, 1970; Bryk and Weisburg, 1977), the NDCS felt that such analysis appeared ideally for minimizing children's performance differences at entry.

While change score analysis may represent a technically acceptable statistical procedure for controlling background differences among children tested on a particular measure, it does not enhance the validity/reliability of the test itself. In this case the battery of existing cognitive measures are not considered, at least among minority NDCS panel members, culture fair. However, the use of change score analysis minimized racial and other socio-economic background differences among children tested and, equally important, allowed for attribution of outcomes to particular configurations of day care environments.

It is also important to note that only children in target classrooms were tested in Year 6 of the longitudinal study. In addition to moving out of the school district, the most frequent reasons for no longer being in a target classroom were failing or skipping a grade, enrolling in a private or parochial school, and, in one site, exercising an available option to be bused to a different elementary school (Shipman et al., 1976, p. 9). As Datta (1978) observed after reviewing the Lazar et al. (1977) study on the long-term impact of early childhood intervention programs on low-income children, the exclusion of children not on grade level in longitudinal studies undermines comparisons between children's performances at T1 and T2.

Finally, Shipman, et al., report finding no difference for Year 1 PSI and Year 6 achievement scores between children who were enrolled in Head Start or some other form of preschool and children who were not enrolled in preschool. In sum, this study, which examined the PSI as a covariable for predicting the influence of family characteristics on later achievement, falls far short of confirming the PSI as a predictor of later school achievement.

The Peabody Picture Vocabulary Test

The original (1959) version of the Peabody Picture Vocabulary Test (PPVT) was standardized on a sample of 4,012 white children and youths in Davidson County (Nashville), Tennessee, that included mentally, emotionally and physically handicapped children. Beller (1970) reports that, compared with other measures of indicated intelligence (e.g., the Goodenough Draw-a-Man Test and the Strongest Point Test), the PPVT yields depressed intellectual achievement scores for economically disadvantaged children.

Mackler and Holman (1976) reject the PPVT as a poorly conceptualized vocabulary test. They point out that it is inadequate as a measure of intellectual potential, unless intelligence is equated with hierarchical vocabulary building or with what one has already learned. In reviewing bias in the original version of the PPVT, Mackler and Holman note a series of biases related to race, region, language and socioeconomic status, despite claims to the contrary in the test manual. They argue that the PPVT has a "blind spot for anything outside the general norm of white, middle-class living" (Mackler and Holman, 1976, p. 360). They also point out several language problems in the oral administration of the test. For instance, black dialect pronounciation could result in wrong responses. Similarly, definitions of words from low-income experience are not necessarily the same as those from middle-class experience, to which the test is geared. For example, "wailing" may not mean "crying" in certain dialects, but "really enjoying an experience."

John and Goldstein (1964) found qualitative differences in verbal performance of four-year-old lower-income children living in New York. An analysis of the first 35 items of the PPVT revealed that verbs, rural-related words and words with low frequency in lower-income families produced consistent errors for this group. Jeruchimowicz, Costello and Bagur (1971) reported that low-income black preschoolers made more errors on verbs than on nouns, whereas middle-income children showed no difference.

Ali and Costello (1971) administered a modified PPVT to disadvantaged preschoolers, in which the first 70 items were randomized for difficulty level and responses were positively reinforced verbally according to a fixed schedule, regardless of accuracy. The results suggest that the modified procedures positively influenced test scores; even more interestingly, results demonstrated a substantial increase in errors when the reinforcement schedule changed from 100 percent to 50 percent. This systematically induced change in performance implies examiner effects on child performance.

Shipman and Tanaka (1971) and Shipman (1972) developed a modified version of the PPVT for Educational Testing Services (ETS) in an effort to reduce obvious racial bias in the original instrument. The ETS adaptation of the first 60 items contained new versions of a number of the human pictures to present black children and adults in a variety of roles. Meissner et al. (1972) used this version of the PPVT in the ETS Head Start Longitudinal Study. In the administration of Form A, which measures receptive vocabulary, the tester presented the stimulus word orally and the child was required to point to one of four picture choices. In Form B, which measures productive vocabulary, the tester pointed to the stimulus picture on the page and asked the child to tell what it was, or, in the case of verbs, to say what the person in the picture was doing. Their results showed that disadvantaged children's receptive vocabulary was more correlated with other measures of cognitive abilities than with their expressive vocabulary. The highly significant differences between socioeconomic groups found in both forms led the investigators to suggest that the test taps "ability" only within a particular cultural context, and that the PPVT is best viewed as a measure of receptive vocabulary.

Meissner and his colleagues urged that the test not be used in its original format, since many of the stimulus pictures are dated and are particularly inappropriate for minority children. The original version of the PPVT, depicting blacks in only two roles, as railroad porter and native spear carriers, may have had effects on children being tested. The NDCS adopted the revised ETS version of the PPVT which measures receptive vocabulary. However, it is not clear that the ETS version adequately takes into account other sources of bias in the PPVT; for example, Meissner et al. (1972) report unstable sex differences.

The PPVT apparently reflects many of the same middle-class biases that the PSI does, but unlike the PSI, the PPVT claims to be a culturally fair test. The literature, however, does not support this claim.

Measurement Effects in Cognitive Test Scores

There is considerable evidence that situational factors--including the race of the tester--can affect black children's performance on standardized tests such as the PSI and PPVT. This fact raised an additional concern about the reliability of standardized tests in assessing the cognitive development of black children tested by black and white testers in the day care setting.

The effect of the race of the tester on children's performance on the PSI and PPVT, then, was a major concern of the Task Force. Slight tester effects were found in raw scores from the first administration of the PSI and PPVT during Phase III. Analysis of the scores revealed:

- Analyses of PSI regression change scores of both white and black children showed that race of tester was not significant.
- The significance of mother's education (socioeconomic status criterion) as a predictor of PSI gains is open to question.
- Analysis indicated that, when all variables except the tester variables (race, sex, education) are controlled, a black child tested by a black tester can be expected to score 1.3 points higher on the PSI than if tested by a white person, and (irrespective of race) about one point higher if tested by a high-school graduate than if tested by someone with a bachelor's or master's degree. Furthermore, a black girl is likely to score 1.3 points higher than a black boy.

In the second round of Phase III testing, race of child and tester were matched as closely as possible. Subsequent analysis of adjusted PSI and PPVT adjusted gain scores showed that race of tester effects were nonexistent for the PSI and statistically insignificant for the PPVT.

NDCS Use of the PSI and the PPVT

Improvements were made in the NDCS design and analytical techniques to mitigate the effects of cultural bias in the PSI and PPVT. First, the PSI and the PPVT were used to measure the change in children's knowledge accumulation over a given period. The use of generalized gain score analysis on raw cognitive scores[8] was adopted in order to eliminate the effects of children's pretest characteristics (family background, socioeconomic status, etc.). This technique was sensitive to environmental influences during the interval between pre- and post-test and to center-to-center differences. The adjusted gain scores of the PSI and PPVT have proved to be largely independent of background variables such as race, sex and family income.

The adjusted gain scores varied systematically across centers, and this center-level variation was ultimately related to the study's major policy variables. Because change scores were analyzed at the center level and not at the child level, corresponding analysis of center-level "background" characteristics was conducted. Center averages of mother's education, family income, number of adults in the home, percentage of white children enrolled and a poverty index were explored. These factors--or covariables--were found to be unrelated to adjusted PSI and PPVT gains on the center level.

NDCS Observation Measures

The remaining instruments used in the NDCS were based on observations of children and caregivers in specified settings.[9] The Task Force urged throughout the study that observation measures play as important a role as standardized tests in generating data on the effects of the policy variables. There is strong support in the literature for this strategy (Walker, 1973), despite general concerns of reliability and validity of observations noted in Chapter Two.

The system selected for observing caregivers and the classroom environment, called the Adult-Focus Instrument (AFI), had been used previously in evaluating the Follow Through and Head Start Planned Variation Projects. The instrument's coding system was modified for the NDCS to record adult behavior in day care centers. The instrument has three parts--the Physical Environment Inventory, which describes the space, equipment and materials in the classroom; the Classroom Snapshot, which records numbers of staff and children present in the classroom and the general configuration of their activities; and the Five-Minute Interaction, a continuous record of the behavior of a particular caregiver.

The Child-Focus Instrument (CFI) is used to record observed behaviors of the child during instructional free play, teacher-directed activity and an experimental situation. For the last situation, the CFI was slightly modified to focus on a limited number of behaviors assumed to be associated with the situation. Although the CFI, as conceptualized by Prescott (1976; see also Prescott et al., 1975), was designed to measure the context and structure of the child's environment, it was used in the NDCS to measure behavioral traits of individual children, which were later aggregated to classroom and center levels for analysis.

Measurement Effects in Observation Instruments

Race-of-observer effects noted by Abt Associates staff during Phase II analysis raised questions about the reliability of the observation measures. The analysis, based on data collected during the first two data collection periods of the study (T1 and T2), indicated that the pattern of coding observations of children and caregivers might have been different for black and white observers. NDCS staff decided that although the race-of-observer effects (first uncovered in the Child-Focus Instrument) were

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small, each of the important dependent measures in Phase II (CFI, AFI, PSI and PPVT) should be analyzed for similar effects.

NDCS researchers could not conduct a conclusive analysis of this problem, however, because the Phase II (T1, T2) data base and design were not structured to accommodate such analyses. In particular, the data base for an analysis of race-of-observer effects was weakened by a scarcity of observations by black observers of white children at T1, T2 and T3. Nevertheless, the analysis was conducted using T2 data because it contained the best distribution of observer race across child race and site. Although not conclusive, the observer effects analysis for the CFI and AFI generated the following conclusions.

Child-Focus Instrument (Phase II):

- Of the 22 codes used on this instrument, 17 are significant for race-of-observer effects on the basis of regression analyses.
- T-test analyses of selected T2 data also showed statistically significant differences on 14 of the 22 codes (the T-test results nearly parallel the regression results).
- Regression analyses on a selected sample based only on observations of children who were observed by both black and white observers again showed significant race-of-observer effects.

Adult-Focus Instrument (Phase II):

- Race-of-observer effects were detected. However these cannot be simply interpreted, since it was shown that race of caregiver, fee structure of center, and social status of children as measured by the PSI also had effects. It is also possible that race of observer actually has an effect on caregiver behavior.

- Black and white observers tended to code at different rates. White observers tended to code more frames on the average.

- There was a significant effect of race of observer on frequency of use of certain AFI codes. The differences for the individual codes led to a significant difference on the combination variables: white observers coded a higher level of interactiveness than did black observers, regardless of the race of the caregiver being observed.

The NDCS analytic team concluded as a result of this analysis that "the significant effect of race of observer clouds the interpretation of the results of the adult-focus analyses. First, the relation of site to caregiver behavior appears to be strong, and site effects are confounded with race of observer effects. Second, the effects of race of staff (caregiver) are confounded with observer effects. Third, race of observer is only one characteristic of the coders that might have affected interpreter reliability. The strong effects of race of observer are an indication of more general problems of reliability with the Adult-Focus Instrument that should be examined before conclusions based on the instrument can be accepted."

On the basis of this analysis, the research design was altered to counter race-of-observer effects in the final data collection effort for Phase III:

- Both children and caregivers were observed by bi-racial teams to mitigate the effect of observer bias.

- Longer observations, by one black and one white observer, were conducted to provide tests of inter-rater agreement.

Analysis of Phase III data showed that these measures reduced race-of-observer effects. Although small and statistically insignificant observer effects were found, they do not jeopardize the reliability of the data. Observation data, like cognitive test scores, were aggregated and analyzed at the center level for Phase III analyses.

NDCS Use of Observation Measures

Inclusion of observation measures in the NDCS effects battery was strongly supported by the Black Task Force. The Task Force urged that observation data be given at least equal weight with test results in NDCS effects analyses. The NDCS minority consultants believed that observations provided a more culturally fair assessment of children's response to the day care center setting. Observation measures provided an adequate comparative measure of day care quality and were analyzed in conjunction with test results in order to arrive at comprehensive indicators of quality care.

The potentially harmful effect of observer bias was reduced in the revised Phase III design of balancing black and white observers, children and caregivers. In this respect, the NDCS research design represents a significant advance in the use of observations as measures of day care process.

Analysis of Outcome Measures

NDCS analyses of Phase III observation and standardized test results are mutually supporting in indicating which configurations of center day care seem to be beneficial for children.[10] Centers scoring high on some of the characteristics captured by the observation measures (e.g., caregiver interactiveness, child involvement, degree to which classes are organized into closed structured versus open-ended activities) also tended to score high on the cognitive measures. A general pattern of child and adult behavior associated with children's acquisition of skills and knowledge as measured by the PSI and PPVT emerged:

- Children in small groups are more interactive and also tend to have higher gain scores on the PSI and PPVT.
- Centers that structure classes into medium-sized groups as opposed to larger ones also have higher gains on both PSI and PPVT.
- Centers described as stressing the individual child's personal development had higher PPVT test scores on the average than centers that stressed children as part of a group.
- Centers in which caregivers spend a large proportion of their time interacting with individual children tend to have higher PPVT gain scores than centers in which caregivers tend to focus their attention on groups of children.
- Centers in which caregivers are more interactive and tend to orient themselves towards children tend to have higher gain scores (especially on the PPVT).
- Centers that can be characterized as having structured as opposed to open-ended classroom processes tend to have higher PSI gains.
- Centers that had an emphasis on acquisition of school-related skills tended to be characterized by higher gains.

The reservations of the Black Task Force regarding the PSI are essentially those surrounding any standardized test of global ability and achievement and surrounding the notion of predictive validity itself. The correlation between PSI and later academic performance is not in dispute and the Black Task Force supports its use for certain research purposes. However, the correlation does not in itself demonstrate that the PSI is a measure of general cognitive skill or ability for which it could easily be mistaken. Moreover, Shipman's research shows that the predictive power of PSI disappears when certain socio-cultural characteristics of the family are controlled.* Since these characteristics are likely to vary with race, they underscore the point that the PSI is a racially and culturally bound measure and should not be used for cross-racial or cross-cultural comparisons of cognitive ability.

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*Shipman, et al. Disadvantaged Children and Their First School Experience, pp. 180-189.

CHAPTER FOUR: CONCLUSIONS AND RECOMMENDATIONS

The satisfactory resolution of many of the problems explained in previous chapters was completed during the final data collection period and during the analyses of effects findings in Phase III. The following factors, in particular, influenced the Task Force's acceptance of NDCS findings:

- Adjustments made in data collection procedures and statistical analyses aimed at isolating test biases were used to eliminate cultural bias in the measures and their administration;
- Effects findings were based on patterns of behavior and outcomes for children and caregivers that reflected converging results on both observations and measures of accumulated knowledge.
- Effects findings were analyzed on the center level not on the individual child or caregiver level; findings were not used to compare ethnic groups on any of the dimensions measured.

NDCS Policy Analysis

The policy implications of NDCS cost/effects findings, presented in the first volume of the NDCS Final Report, are sensitive to the concerns of the black community[12]. In particular, the Task Force endorses the statement that the fundamental criterion for evaluating alternative policy options is their effect on the well-being and development of children in federally subsidized care. The report attempts to rule out policy options that are clearly inferior and presents for consideration feasible options for federal regulatory policy and administrative practice in the day care arena.

Several other policy considerations are also particularly relevant to the Task Force's concerns. The policy analysis in the Final Report points out that, "The variability in the characteristics of day care centers across states reflects the serious inequity in the current uneven enforcement of federal day care regulations. If the federal government does not adopt a consistent, unambiguous and determined posture with respect to the objectives, content, interpretation and enforcement of federal day care purchasing regulations, major inequalities in the characteristics of day care services across states will persist." Because black children are disproportionately represented in the federally subsidized day care population, they are undoubtedly affected by inequalities in the characteristics of day care services across states. A clear and consistent regulatory policy could assure that children receive day care comparable in quality regardless of where they live.

Although NDCS effects findings could not specify a caregiver specialization requirement, the Final Report concludes that research results were strong enough to suggest that such a provision be considered for future federal day care regulations. Specialized training in a child-related field clearly promotes better care for children.[12] This finding is of major importance to black caregivers as well. A specialized training requirement and/or training program for federally subsidized day care would provide the opportunity for skilled and rewarding work for many low-income persons without academic credentials.

Black caregivers constitute a substantial proportion of all caregivers employed in federally subsidized day care centers (28 percent). The NDCS found that day care center staff are paid relatively low wages compared to workers with similar educational attainment and experience and that almost 30 percent of lead teachers and more than 45 percent of classroom aides in day care centers are paid wages less than or equal to the federal minimum wage. Chapter Eight recommends that reimbursement rates should be set high enough that centers are able to pay all staff the federal minimum wage. However, even payment of the minimum wage is not sufficient to lift most day care staff, many of whom are the primary or sole income-earners in their families, above the proverty threshold. Persons experienced and qualified to care for young children should receive adequate pay and sufficient incentive to improve their caregiving skills.

Conclusions and Recommendations of the Task Force

Both Abt Associates Inc. and ACYF have shown their awareness of the sensitive nature of social policy research. Their approach to the NDCS has been marked by appropriate sensitivity to the human and political problems associated with carrying out a study involving multiethnic groups. They have responded reasonably to the concerns of minorities, especially the Black Task Force of the NDCS Consultant Panel.

Much of the concern expressed by the Task Force throughout the study focused on the use of standardized cognitive tests as a measure of day care effects. The consultants were apprehensive about whether such tests were valid and reliable measures of specified cognitive traits among black children. These concerns were significantly allayed by considering the test scores as only one element of a whole complex of data. Adjustments made in later phases of the data collection procedures, by statistical procedures aimed at isolating known test biases and, most importantly, by the appropriate use and interpretation of these test data in the NDCS also indicate NDCS responsiveness to these concerns.

Despite their limitations, standardized tests have proved very useful in addressing the study's major policy issues. Whether these tests are valid measures of individual cognitive ability, valid predictors of school achievement among black children, or whether they capture a large or narrow slice of a child's cognitive domain will remain contested issues. The test battery used in the NDCS represented adequate instruments for the purposes of the study.

Standardized tests were not considered measures of intelligence in the NDCS, nor were they used for the purpose of comparing ethnic groups on this dimension. Rather, aggregated at the class and center level, test scores were used to complement observational data as indicators of day care program quality. The NDCS' standardized test data and observational data provide convergent conclusions about those patterns of center-based day care that seem to be most beneficial to children. For these reasons, the Task Force supports the use of effects findings based on NDCS instruments.

The process by which these conclusions were reached involved several major social research methodological and design precedents:

- The involvement of a culturally representative review body and research staff in the conduct of major social policy research;

- The use of observation measures as major indicators of day care program quality for young children;

- The adaptation of study design to address race-of-tester/ observer effects in multiethnic research.

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These steps should serve as models for future policy research efforts involving blacks and other minorities. Other issues identified by the Task Force have bearing on future policy research in the child development area:

- Future research efforts should be aware of and responsive to the need to identify and develop appropriate measures for the different populations studied, e.g., different ethnic and language groups. The practical requirements of implementing and completing large-scale studies too often dictates practical and immediate solutions to these problems.

- Further development of observation measures of young children's development should be pursued, including examination of reliability problems associated with observer bias.

Many blacks and other researchers fear that secondary analysis of NDCS effects findings for cross-ethnic comparisons could be misused or misinterpreted. As specific measures of cognitive and socioemotional development at the child level, there are sufficient questions of race and class bias in the PSI and PPVT, coupled with race-of-tester effects, to make the data suspect for valid cross-cultural comparisons.

Abt has responded to this concern by storing all individual child and staff racial identifiers on a separate computer tape, linked by code to the full data base. Requests for use of this tape by responsible researchers will be reviewed jointly by ACYF, Abt and the minority subcommittee of the Society for Research and Child Development. However, the Task Force recognizes that freedom of access to public data should not be unfairly restricted. All researchers should have equal opportunity to review and reanalyze NDCS data. The request process described above is intended only to safeguard against blatant misuse of data that were collected for a specific purpose. NDCS researchers feel a responsibility to the children, parents and center staff who participated in the study in good faith to promote knowledge and understanding of center day care.

NOTES

1. Two research organizations were funded by the Administration for Children, Youth and Families (ACYF) to conduct the study, Abt Associates Inc. (AAI) of Cambridge, Massachusetts and SRI International of Menlo Park, California. Abt Associates had overall administrative and technical responsibility for the study, while SRI, as testing contractor, was responsible for selecting and administering measures both of day care classroom processes and the effects of regulatable center characteristics on children in the classroom.

2. The large number of black children in the NDCS sample is a consequence of site selection factors, compounded by the large number of centers included in the Atlanta site, and the selection criterion of federally funded (sponsored) and full-time centers. The reader should be aware, however, that the racial composition of children in day care centers nationally, including nonfederal sponsors and part-time centers, is approximately the reverse of the white-black mix included in the sample. See Day Care Centers in the U.S.: A National Profile 1976-1977, Volume III of the Final Report of the National Day Care Study (Cambridge, MA: Abt Associates Inc., 1978)

3. William Morrill, remarks made at a policy seminar at Abt Associates, Cambridge, Massachusetts, January 11, 1977.

4. Letter of Dr. Asa Hilliard to Allen N. Smith and Dr. Jane Stallings, March 18, 1976, see Appendix B.

5. The major undebatable similarity between all racial groups in the United States is that they all belong to the same biological species. Beyond this often overlooked fact, studies on racial differences, especially in the psychological literature, dominate the field. Our position is that just as there are observable physical differences between racial groups there are cultural differences as well. The physical attributes of a given racial group are dependent upon the hereditary properties of the group members. However, the social attributes seemingly are functions of cultural elements, which modify and shape observable behaviors. We think that it is obviously an error to attribute acquired, learned traits to heredity in the presence of known learning experiences. Such a position nonetheless has been assumed by many contemporary theorists in attempting to explain racial differences in behavior acquisition of different groups. Furthermore, we recognize that blacks can conform to white cultural patterns and vice versa, where if it were not for observable racial characteristics one could not

distinguish individuals according to cultural affiliation. One does not need a measurement device to ascertain such a simple observation (see Rogers, 1944; Jahn, 1968; Driscoll, 1976). Certainly there are behavioral differences between blacks and whites. But the extent to which these differences are inimical to cultural influence, especially since they are largely acquired traits, is irrational. The critical concern has been that the conceptualization of what has been observed as different has also been often labeled as inadequate. Although certain behaviors might well be inadequate in certain contexts, the behavior of blacks can not simply be dismissed as inferior to that of whites, especially where the two groups may function in or be adapted to different environmental contexts.

6. The NDCS went beyond examining interobserver agreement as a source of bias and included variance component analysis as well. See J. Travers, C. Coelen and R. Ruopp, National Day Care Study Second Annual Report, (Cambridge, MA: Abt Associates Inc., 1977).

7. See J. Travers, C. Coelen and R. Ruopp, op. cit.; and J. Travers and R. Ruopp, National Day Care Study Preliminary Findings and Their Implications, (Cambridge, MA: Abt Associates Inc., 1978).

8. See R. Goodrich and J. Singer, "Cognitive Change in the National Day Care Study Effects Analyses, Volume IV-C of the Final Report of the National Day Care Study (Cambridge, MA: Abt Associates Inc., 1979). See also, Lee J. Cronbach and Lita Furby, "How We Should Measure 'Change'--Or Should We?" Psychological Bulletin, Vol. 74, No. 1, 1970, pp. 68-80.

9. See J. Travers, C. Coelen and R. Ruopp, op. cit., for full descriptions of observation measures. See also R. Ruopp, J. Travers, F. Glantz, and C. Coelen, Children at the Center, Volume I of the Final Report of the National Day Care Study (Cambridge, MA: Abt Associates Inc., 1979).

10. See Ruopp et al., op. cit., Chapters Five and Six.

11. See Ruopp et al., op. cit., Chapter Eight.

12. Ibid., Chapters Six and Eight.

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APPENDIX A: NDCS CONSULTANT PANEL

The members of the NDCS consultant panel were all selected on the basis of long-standing interest and expertise in day care and early childhood programs. Members of the Black Task Force are designated with an asterisk after their names.

Robert O. Bland, Ph.D.*	Assistance Vice President Merrill-Palmer Institute Detroit, Michigan
Louise L. Sally Brown	Director Council on Early Childhood Center for Urban Studies Wayne State University
R. Virginia Burke*	Independent Consultant Washington, D.C.
Jean V. Carew, Ph.D.*	President, Research for Children, Inc. Palo Alto, California
John R. Dill, Ph.D.*	Assistant Vice President for Academic Affairs Associate Professor of Psychology Memphis State University Memphis, Tennessee
Arthur C. Emlen, Ph.D.	Director, Regional Research Institute for Human Services Portland State University Portland, Oregon
Robert Allen Fein, Ph.D.	Deputy Medical Director, Bridgewater State Hospital for the Criminally Insane, Assistant Psychologist, McLean Hospital Belmont, Massachusetts

Asa Grant Hilliard III, Ed.D.*	Dean, School of Education, San Francisco State University San Francisco, California
Mary C. Howell, M.D., Ph.D.	Chief of Pediatrics Charles Drew Family Life Center, Dorchester, Massachusetts
Teh-wei Hu, Ph.D.	Professor of Economics, Center for Research on Human Resources Pennsylvania State University State Line, Pennsylvania
James Alan Levine	Research Associate Center for Research on Women Wellesley College Wellesley, Massachusetts
Richard J. Light, Ph.D.	Professor of Education, Harvard Graduate School of Education Cambridge, Massachusetts
John M. Love, Ph.D.	Director, Research Department, High/Scope Educational Research Foundation Ypsilanti, Michigan
Christine Pratt Marston	Consultant, Project on Women and Mental Health School of Social Work University of Washington Seattle, Washington
Keith McClellan	Associate Director, United Labor Agency, Inc. Cleveland, Ohio
William J. Meyer, Ph.D.	Professor of Psychology, Director of Developmental Psychology Training Program, Syracuse University Syracuse, New York

Gwen G. Morgan	Lecturer, Lesley College: Problems and Issues in Day Care; Consultant, Texas Office of Child Development, Southeast Educational Conference Concord, Massachusetts
John H. Niemeyer	Chairman of the Board, Day Care and Child Development Council of America New York, New York
Daniel M. Ogilvie, Ph.D.	Associate Professor of Psychology and Department Chairman Livingston College, Rutgers University New Brunswick, New Jersey
Elizabeth Prescott	Faculty - Pacific Oaks College Pasadena, California
Mary Potter Rowe, Ph.D.	Special Assistant to the President and Chancellor for Women and Work Massachusetts Institute of Technology Cambridge, Massachusetts
Richard Roy Rowe, Ph.D.	Vice President, American Institutes for Research (AIR) Cambridge, Massachusetts
Nancy Ewing Travis	Director, Child Care Training Project, Southern Regional Educational Board Atlanta, Georgia
Harmon Lamb Walker*	Director, Seattle-King County Head Start Program Seattle, Washington
James Clayton Young, Ed.D.*	Executive Director Association for Childhood Education International Washington, D.C.

APPENDIX B: SELECTED CORRESPONDENCE OF THE BLACK TASK FORCE

B-1	Letter of Concern from Dr. Asa Hilliard to Mr. Allen N. Smith and Dr. Jane Stallings March 1976
B-2	Position Statement: Black Advisory Board Members July 1976
B-3	Preliminary Report and Recommendations of the NDCS Black Task Force December 1976

San Francisco State University
1600 HOLLOWAY AVENUE • SAN FRANCISCO, CALIFORNIA 94132

March 16, 1976

Mr. Allan N. Smith
Office of Child Development
P.O.Box 1182
Washington, D.C. 20013

Dr. James Stallings
Stanford Research Institute
Menlo Park, CA. 94025

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Dear Mr. Smith and Dr. Stallings:

In keeping with your request in the letter from Dr. Stallings dated March 12, I am responding, with comments, to the report of Field Testing of Instruments for the National Day Care Cost-Effects Study by Stanford Research Institute. Thank you for the opportunity to review the document and to offer the following observations.

I note from your document that you are in the second phase of a three phase project and that at the conclusion of the third phase there is the intent to produce "the relationship of measured changes in child behavior and the policy variables..." In your letter to me you requested that I make observations about the appropriateness of the child variables which were selected for your sample, and that I comment on the measurement selection and, if appropriate, that I recommend other measures to be considered. I have gone through the document quite carefully and find that I have comments both of a general and a specific nature. Please bear with me as I approach the general comments first for the task which I have been asked to perform is cast in such a way that critical considerations regarding the whole assessment process could be overlooked.

General Concerns

The job of evaluating "instruments" must proceed from a variety of perspectives. Instruments do not stand in isolation from a variety of influential contextual forces. It is indeed unfortunate that we have tended to treat "instruments" as if they were totally self-contained and were separated in space and time from users and conditions. The following observations will illustrate the point.

1. The Error of "Universality"

To use the instruments which are described in a nationwide assessment is to proceed as if all children, communities, programs and child care providers are basically alike, and yet we know quite well from observation and from the research that no two programs are alike in goals or operation. We also know that the many cultural groups, each carrying their own language, style, world view and values, and that these components are reflected in any assessment process in such a way as to confound data collected from standardized instruments. Every single child variable which has been selected and described beginning on Page 6 takes on a unique meaning in any given cultural context. Nowhere in the document is there reflected a sensitivity to this variability.

2. "Instruments" are Fused With the Users.

It cannot be ignored that the person administering the"instrument" or interpreting data from the instrument is in actual fact a variable in the data collection process. That person is a variable, first, because the subjects of assessment are effective differentially by different observers when they give their responses and, in the second instance, the observer is a variable in that observers from a common culture bring to the assessment situation preconceptions and values which structure their responses independently of the behavior of the subject. Given this fact, raw data in themselves have little meaning. Some improvement in the situation can be gained only if the person making the observation, and the conditions under which the observations have been made are described systematically and in depth equal to the kind of assessment being performed on the subjects. To be specific, for example, we know that the ethnic background of observers influences both client response and observer interpretation. There is no evidence that the "instruments" take into account such variables as ethnic background, age, sex, value orientation, self-concept, etc. of the observer. To continue without this is to repeat the gross errors of all previous large scale assessments involving cross-cultural populations of observers and subjects. I cannot emphasize too strongly the fact that we have a dangerous situation where observers are lulled into believing that any test or observation system can be applied to any population on the assumption that the observation is a "standard procedure."

3. Meaningful Assessment Must Tie Programmatic Goals to the Child Care Process

It appears from the document that the final outcome of the field testing of the instrument will be to develop a standard battery to be administered in the same way to all populations across the nation. It should be clear to even the casual observer that child care programs differ widely in terms of programmatic goals and in terms of the design and implementation of the process of care itself. Meaningful evaluation then is really a matter of comparing a child's growth before and after a program of services has been delivered but this must be done in terms of the goals which were stated. To fail to take this in to account is to assess a given program for goals which it does not seek and to fail to assess a given program for goals which may be indicated as its priority. To my knowledge there exists no set of national goals for day care. The very act of developing a standard battery to assess day care program flies in the face of reality.

4. Incomplete and Inadequate Review of Relevant Scholarship

I took careful note of the references which were cited and listed and was disappointed to discover that even though your letter indicates that the assessment is designed for and directed toward primarily low income Black and White families and middle income Black and White families, there was no reference indicating that significant minority scholarship had been utilized. In my opinion this cast serious doubt on the quality of the review of literature. To be specific, Dr. Wade Nobles of the Westside Community Mental Health Center is probably the foremost scholar on Black self-concept in the country today. Not only has Dr. Nobles developed and published important theoretical and practical formulations, he also has provided important critiques of existing literature on the assessment of self-concept of Black children by White researchers. Dr. Nobles, among other Black psychologists, is nationally known and respected by the entire establishment of Black Psychologists. Even though he is in the Bay Area, and I believe may even have worked at Stanford at one time, his work is totally overlooked. Similarly, the seminal work by Gloria Johnson Powell which is reported in Carl Senna's book, The Fallacy of I.Q., was totally ignored, and yet Dr. Powell's research has indicated clearly the difficulties of approaching the measurement or Black self-concept in standard fashion. Further, the most recent research by Manuel Ramirez, III and Alfredo Castenada which is reported in their book, Cultural Democracy: Bicognitive Development in Education, has been totally ignored and yet this is a major scholarly contribution from persons competent to hold a minority perspective. They are also in our home state. In addition to the above, I would highly recommend consideration of the book by Peter Schragg and Diane Divoky entitled, The Myth of the Hyperactive Child. Such considerations as are presented there are particularly germaine to the study underway. In 1976, in the face of all the historical blunders in minority assessment, it would be unforgivable that a study dealing in large measure with Black populations would be conducted with no attention to the scholarship which has emerged in the last few years from a Black perspective. I hasten to add that this is not simply a matter of equity or fair play. It is a matter of adequacy and scholarship.

5. Confused Goals, Research or Assessment

I have observed earlier that the instruments appear to have been developed without any recognition of variety in Day Care sites. Without attention to the operational goals, and not simply the potential or theoretical goals, what is the basis for the selection from among the variety of instruments? There is a real danger here that what is intended to be an assessment of effects will, be fact, be fishing expedition research. Quite naturally, research is an aspect of the field testing of instruments. This is as it should be. However, the selection from among field tested instruments requires a further step. That step is to insure congruence between the instrument selected and the program and goals which are offered and pursued. Nowhere in the document is there a suggestion that such is to be the case. Every suggestion seems to point to the use of a universal battery, which makes sense only if there is universal programming.

I'm sure it is clear by now that I have funadmental reservations about the entire process of the assessment and not simply reservations about small pieces of the operation. If the Office of Child Development is interested, truly, in assessing the effectiveness of programs then two fundamental guidelines seem imperative.

1. The assessment instrument or processes must be content valid with respect to the program being offered, and
2. No assessment should be done for variables which are not clearly a part of the design of a given Day Care operation, that is to say, diagnosis in areas where it is clear that no prescriptions are available, constitutes an invasion of privacy and a meaningless exercise. For example, there is no need to diagnose for nutrition if there is no intent to feed.

Particular Observations

1. Variable Selection Weakness

On page 6 of the document it was indicated that the variables which were selected for examination were the result of the literature search and the recommendation of consultants. Although the process of variable selection was not fully explicated, it appeared that the final result comes down to a matter of consensus across a variety of groups. I can't help but wonder if, by Day Care Center basis, the same variables would be selected as important.

2. Variable Definition as Poorly Defined Constructs

Each of the child variables indicated is treated in the same way. There is a very short description of the variable, then there is a very long description of the variable as indicated in the literature. The problem here is that it is not clear that a construct such as "dependency" means the same thing across researchers, such as Mussen, Sigel, and Beller. Similarly, there's no discussion of a precise link between the constructs named and the assessment instruments designed to assess the construct. Therefore, for pages 6 through 27 variables are listed but there is no precision in the definition of the variable.

3. Inadequate Reliability for Standardized Instruments

In Chapter 3 the report deals with a comparison of measures. According to Nunnelley, acceptable reliability for research instruments should approach .95. Ignoring internal consistency figures and looking at the test re-test or interrater reliability, as might be expected, reliability in general tends to be from low to virtually non-existent. However, there is a fundamental flaw in the presentation of the data. Once again the implicit assumption of universality permits one to ignore known facts about any assessment instrument. A major known fact is that there is differential validity and reliability to most instruments. This is particularly so for different ethnic groups. Once again, since the major portion of the target population involve Black children, it would be inexcusable to utilize reported reliability coefficients without reporting those coefficients separately for Black children. Similarly, in view of the fact that the observer or administrator of instruments are known from previous research to be variables in the assessment process, some systematic way of expressing a reliability coefficient modified by the ethnicity of the observer is required. Without minimum reliability, it is virtually impossible to gain validity. Anyone conducting an assessment program which purports to measure the cost effects with amorphous, unreliable, low validity instrument carries a major responsibility for communication about the defects of the assessment process. There is certainly an ethical question involved here.

4. Absence of Validity Data on Classroom Environment and Instructional Practice

On page 51 it is stated that "in this study quality of care defined as those classroom environments and instructional practices that promote the normal growth and development of children." I certainly accept this observation, however, nowhere in the document is there any allusion to any literature which ties aspects of classroom environments or instructional practices to changes in children. While we can be certain this is the case, for assessment purposes being certain is not enough, it must be demonstrated. In Chapter 4 it is clear that it is very easy to utilize any one of a variety of observation instruments to describe classroom operation. What is not clear, however, is how the information about classroom operation, which is to be collected, will be utilized in the determination of cost effects. The concluding paragraph on page 104 is very interesting for the absence of any mention of the tie between observation of classroom performance and pupil outcomes. In short, what is to be done with the data from the observation? It is understood that this is a field test of instruments and that the specific research design is not described, however, a design is implied in the very selection of instruments. What will these be used for? To give an example of what happens in a highly sophisticated articulation of the connection between observed process variables and public outcomes, I refer you to Dave Berliner, Ray Rist and William Tikunoff's study at Far West Laboratory for Educational Research concerning the teaching variables associated with the presence or absence of pupil gains.

5. Item Bias Discussion Limited to Narrow Statistical Meaning

The discussion of Item Bias on page 118 and in Appendix E-Page 5 it appears that the total discussion of Item Bias hinges upon statistical item analysis. Much more data is needed in order to demonstrate the absence of bias in both the statistical and in the broader sense. To demonstrate statistically that the shape of the curve for any two groups is equivalent is not in itself sufficient to demonstrate the absence even of statistical bias.

6. Recommended Variables and the Absence of Theoretical Integrity

An examination of the variables listed in Table 17 indicates an absence of an articulated, philosophical, theoretical, and socio-cultural integrity to the measures being proposed. Particularly noteworthy in this regard is the fact that such variables as dependency, autonomy, aggression, self-control, social involvement, etc., gain their meaning only in a given social context. The effect of a national assessment is to dissect and separate from a socio-cultural context variables which by that act will lose their meaning.

Conclusion

I've expressed my concerns in the strongest way possible. I do this not out of any negative feeling for SRI or even because of any theoretical disagreement with the procedures which have been advanced. My primary concern is that information once developed is never innocent. It becomes even less innocent when it bears a stamp of respectability which easily comes as a consequence of the identification of instruments or studies with prestigious research institutes or major government agencies. Knowing this, all of us bear a heavy responsibility to pursue research only in the most competent, accurate, and careful fashion. The history of shallow research and negative consequences in public policy is so widespread and fresh that consequences must be anticipated at every point in the development of information. There is no point where we can be casual about what we do. I am well aware that often in the course of the exercise of our professional skills we may be called upon by lay constituencies to deliver things which we know professionally to be difficult and, in some cases, even impossible to deliver. If, at any time, we reach that point, the choice of paths for us is clear.

In the present instance, I make the following summary conclusions.

1. Assessment instruments must be valid and reliable.

2. The validity and reliability must be demonstrated separately for each cultural group being assessed.

3. Assessment must be relevant to program objectives which are most frequently site specific

4. No assessment should proceed without involving Black populations, or other minority populations, without reference to an integral utilization of the perspectives of those who possess demonstrated sophistication and understanding of those groups. SRI can make a major contribution by coming out strongly in favor of those few things which we know to be productive and, just as importantly, by taking a clear position on that large number of things which we know to be truly speculative. For the children, it's a matter of life and death.

Thank you for the opportunity to respond.

Sincerely,

Asa G. Hilliard, Dean
School of Education

AGH:eh

POSITION STATEMENT: BLACK ADVISORY BOARD MEMBERS

July 1976

The National Day Care Study

The National Day Care Study (NDCS) is an effort to determine what the most efficient day care arrangements for children are. This study will attempt to provide answers to questions which have national implications as their basis. The analysis and interpretation of data from the NDCS will assist the National Office of Child Development to establish federal regulations on day care policies governing staff/child ratio, professionalism of the staff and size of center enrollment.

Black members of the National Advisory Group (NAG) strongly take the position that the entire research effort ought to proceed with extreme caution. Research in day care is in the embryonic stage and should be explored thoroughly to insure that the consequences do not reflect negatively on black children. The most recent history of social science research in Head Start should serve as a warning light at each juncture.

This position is supported by the fact that the social and political ramifications of such a study have as their logical end point, unintentionally or otherwise, conceivable damage and/or setbacks to black children and black day care staff members.

Research conducted by Bee and Associates raised several salient issues common to intervention-oriented research; for example, the interpretation of data between social classes and judgments made about minority children's performance on certain cognitive tasks. These issues can serve as a referent in relation to the efforts of the NDCS.

In particular, 60 percent of the sample population is black and these children represent different SES groups. Questions of the following nature need to be given serious consideration in the research program: (1) Will an analysis and an interpretation of the data obtained show differences between social classes? (2) To what extent will minority day care staff members be put in jeopardy concerning their professionalism with respect to credentials or the lack of them? (3) Are there safeguards built in that will forewarn various (reading) audiences of the extent to which value judgments may have entered into the selection of variables and the coding of observed behavior which could be obscured because the information reported is embedded within a quantitative format?

The thesis being offered here is that "objectivity" is being superimposed on a subjective value base and that a meaningful examination of the research program would indicate a reflection on these values.

Further concern would be that value judgments were involved in the categorization of certain variables.

The above points suggest that the assessment system is limiting in terms of outcome measures and bears no relationship to center goals. This type of assessment is a weakness that characterizes most programs for young children. The assessment of child outcomes is frequently determined on the basis of expediency and convenience, instead of gearing assessment procedures to relevant program objectives. The assessment system must concern itself with the selection of instruments that will yield reliable and valid measurements. To avoid the pitfalls of past research programs, Abt Associates must not only be sensitive to the concerns of the black constituents but to take the position that research in the area of day care needs to be done slowly and cautiously and in the most sophisticated manner.

Abt Associates has initiated an effort to get input from black professionals. However, we see this as a first step. To insure that there is ongoing communication, we offer the following recommendations:

1. That black advisory members review all preliminary reports from the NDCS before they become final;

2. That black advisory members of both the NDCS and NDCHS work together as a task force for input and review of the National Day Care Study's report;

3. That Abt Associates arrange for the task force to attend an interim meeting to review the reports before final publication;

4. That preliminary reports be disseminated to task force members several weeks prior to an interim meeting;

5. That the task force be invited to all advisory board meetings and interim meetings;

6. That Abt Associates employ a minority senior research analyst;

7. That Abt and SRI place stronger emphasis on observing and analyzing the experiences, both cognitive and social-emotional, that children encounter in the centers and day care homes. Further, that the relationships between the independent variables and these profiles of experiences be carefully analyzed and given as much weight in recommendations to policy makers as the corresponding relationships with test scores;

8. That a careful preliminary direct-observation study on a representative sample of day care homes be carried out before Phase II of the NDCH study is begun. All aspects of the research contemplated in Phase II should be tried out in this pilot study and the data analyzed, reviewed and understood before Phase II is initiated.

MEMORANDUM

TO: All Interested Participants in the National Day Care Studies (Center and Home)

FROM: The Black Task Force

RE: Preliminary Report and Recommendations

DATE: 21 December 1976

Overview

The National Day Care Study was developed by Abt Associates Inc. and SRI under contract with OCD. The original contract design called for an advisory panel of consultants, which included only one black during Phase I. Later, out of a sensitivity and recognition that the study had a population of 67% black, Abt moved to expand the number of blacks participating on the advisory panel. During the month of July 1976, the advisory panel convened and it was quickly recognized by the expanded black advisory panel that there were major implications related to both research and policy that were not addressed in the research design. After days of discussion in small groups with the contractors in July 1976 recommendations were made and a Black Task Force report was issued highlighting some of the concerns of the black members of the advisory panel. A second meeting was called in December of 1976 to convene the black members of the National Advisory Panel. The purpose of the meeting was to ascertain how far Abt and SRI had moved in implementing the recommendations of the Black Task Force at the July meeting and to determine what further recommendations might be made.

Although the Black Task Force thought most of the recommendations from the July 1976 meeting had been implemented, there still were some recommendations that had not been implemented. It must be emphasized that the priority issue for the Black Task Force is policy implications of the National Day Care Center Study. However, prior to any consideration of such policy issues our immediate concern involves basic research related issues that will generate and ensure qualitative and unimpeachable research design. Once these matters have been resolved than the policy issues will become top priority. Unless the highest standards of quality control were exercised in the data collection process the resulting information would provide a weak and misleading basis on which to base policy.

For example, two of the most important recommendations concern the training of black and white observers in the coding of behaviors of black and white children and of black and white caregivers, and the training of black and white examiners in testing black and white children. The Black Task Force was deeply concerned with the possibility that black and white observers and testers might diverge considerably in their perceptions and evaluation of the behavior of children both in classrooms and in testing situations, unless specific precautions were taken to ensure that this did not happen.

In the meeting of December 1976 it was found that in line with the Black Task Force anticipations there was considerable evidence of wide discrepancies in the coding of behaviors of black and white children and in black and white caregivers by black and white observers, and there was also suspicion that a similar discrepancy might be found with respect to the test data. The significance of these preliminary findings pose a most serious threat to the validity of the entire research effort because unless the observation and test data are reliable there remains no empirical basis for policy. These findings, although admittedly preliminary and in need of further analysis, illustrate the need for the Black Task Force to play a larger role with respect to the Center Day Care Study and to exercise much closer and more frequent monitoring of the data analysis and preparation of the reports. This requirement is reinforced by the fact that the contractors are now in the final stages of the research and simultaneously in the early stages of a related research project, the Family Day Care Home Study. The Black Task Force feels that this second study would benefit greatly from early input into its design and instrumentation so that some of the errors made in the course of the Center Day Care Study are not repeated.

In the light of these concerns the Black Task Force has outlined a schedule of activities that it will need to undertake with respect to both the National Day Care center study and the Family Day Care Home Study. All activities and recommendations arrived at by the Black Task Force group at the December 1975 meeting are attached.

Preliminary Report: Role of the Task Force, Critical Dates, Procedural Recommendations

This is a preliminary report. A more thorough definition of the role of the Black Task Force will be forthcoming.

1. Overall Role of Black Task Force

   The role of the Black Task Force is to act as a bridge between the current studies - National Day Care Study and National Home Day Care Study. Their job is to review, monitor, make recommendations, and develop position statements on all activities of both studies and their spin-off studies to and with all contracting groups involved;

2. In addition to the schedule supplied by the Abt staff, we have put critical dates that we foresee to respond and meet the needs of our imput and your contractual compliance;

   Review Draft of Phase II Report and comment

   Receive and review the following materials from SRI:

   - Phase II Report on instrumentation for the Center Study

   - Design and propose instrumentation for the Home Study Meeting in Palo Alto the week of January 23 (Monday - Wednesday, January 24-26) with SRI staff. Comment on materials sent the 1st of the month and review the training videotapes/audiotapes and have explicated the whole training process.

   February -

   - Review draft of Public Phase II Report (Second Annual Report)

   March -

   - Proposed meeting of Black Task Force
   - Meeting with all consultants on the projects

3. Prior to each meeting of the Black Task Force copies of synthesized reports should be mailed two weeks in advance to members of the task force to enable the participants to review and develop recommendations, also have input into Agenda formation;

4. The Black Task Force will request outside consultant help whenever necessary to effectively develop recommendations to the contractors;

5. The Black Task Force recommends that during the interim senior black staff from Abt serve as liaison between the task force and contracting groups. Interpreting information to the contracting groups and serving as executive secretary

for the Black Task Force will be duties of this person;

6. The Black Task Force recommends that the group be enlarged to include Dr. Asa Hilliard and black economists;

7. Make available the State-of-the-Art papers to the members of the Black Task Force as a resource;

8. The Black Task Force recommends that ample time be allowed for high quality consulting to take place, using all the skills and abilities available on the task force. Travel time, preparation time, and actual work time on site should be taken into consideration.

Analytic Recommendations

1. The Black Task Force must review all data collection instruments involving black subjects before they are finalized, including those for the infant study and all other spin-off research projects.

2. The family home study must be a descriptive study only and must not attempt to attribute test outcomes to caregiver behavior. The black task force should review all plans and instruments with SRI before they are finalized.

3. The final round of testing and observations (both child- and adult-focus) should systematically measure and report simultaneously on adjacent charts and narratives of the effect of the race of tester or observer.

4. The Black Task Force should be empowered to design and carry out a special mini-study to analyze the race of observer effect data. Findings must be included in the body of all reports, indicating the extent of race of observer effect and the limitations of the test scores and observation profiles. These results are to appear adjacent to results which are reported on testing, behavioral observations, etc.

5. A chapter within the final report must be prepared by the Black Task Force giving our interpretation and analysis of the entire National Day Care Study, particularly dealing with the outcome variables and including alternative criteria for quality day care from black perspectives.

6. Rather than the term "professionalism" reports must use the term "formal education" since this more accurately describes what the data reflect. When and if the term "professionalism" is used, it refers to a cluster of specific skills and functions and not simply a description of certificates.

7. The findings of all analyses concerning differences between black and white children and black and white caregivers must be made available as soon as possible to the Black Task Force. The Black Task Force will exercise the right to recommend which of these data should be maintained, which of these data should be destroyed, and how the data should be published in reports concerning the Center Day Care Study.